NUS CORPORATION

1927 LAKESIDE PARKWAY
SUITE 614
TUCKER, GEORGIA 30084
404-938-7710

49[illegible]1

C-586-5-8-24

May 9, 1988

Mr. Robert Jourdan
Site Investigation and Support Branch
Waste Management Division
Environmental Protection Agency
345 Courtland Street, N. E.
Atlanta, Georgia 30365

Date: _____
Site Disposition: _____
EPA Project Manager: _____

Subject: Preliminary Reassessment
Vermont American Corporation
Toccoa, Stephens County, Georgia
GAD084362656
TDD No. F4-8802-28

NFRAP

Dear Mr. Jourdan:

FIT 4 conducted a preliminary reassessment of the Vermont American Corporation in Toccoa, Stephens County, Georgia. The assessment included a review of EPA and state file material, completion of a target survey, and an offsite reconnaissance of the facility and the surrounding areas.

The Vermont American Corporation is a privately owned company which began operations in October of 1977. The facility manufactures circular saw blades. Operations include the grinding, cutting, shaping, ink stamping, and chrome plating of metal materials. Wastes produced on site are recovered lubricating oil, ink contaminated lacquer, and chrome hydroxide sludge (Ref 1).

Onsite waste treatment of the chrome plating wastewater begins with an increase in the pH from 6.5 to 7.5. An electrochemical process changes the hexavalent chrome to a trivalent state and incorporates a flask rinse to minimize the formation of hydrogen chloride gas. Following the addition of a polymer the solution is sent to a clarifier unit where the solids are allowed to precipitate out. The product is sent to a filter press for sludge dewatering treatment and the resulting effluent is discharged into the sewer system.This process produces approximately 25 drums of chrome hydroxide sludge per month. All waste products with the exception of the ink and lacquer thinner are shipped to SCA Services of Pinewood, South Carolina for disposal. The ink contaminated lacquer is shipped on a quarterly basis to Caldwell Systems, Lenora, North Carolina for incineration. A degreasing process, which produced a trichloroethylene-contaminated waste product at a volume of 55 gallons per month, was discontinued during 1982 in favor of a washing solution process which utilizes recycling capabilities (Ref. 1).

In November of 1980 the company filed a request for a Hazardous Waste Permit application with the EPA. Another request was filed in the fall of 1982 for the withdrawal of the aforementioned permit. The facility's current status is listed as that of a generator (Ref. 2). In September of 1984, the

company was cited with violations consisting of a non-amended contingency plan and failure to maintain a weekly inspection log, however, these violations were corrected within a 30 day period. An inspection on December 12, 1985 by personnel of the Georgia EPD found no evidence of onsite spills or disposal of hazardous waste (Ref. 3).

The Vermont American Corporation is located in the Piedmont Physiographic Province of Georgia (Ref. 4). The area is underlain by granitic gneiss (Ref. 5). The overlying regolith (weathered rock) and fractures within the granitic gneiss form the crystalline rock aquifers. The thickness of the regolith and the size, frequency, and degree of interconnection amoung fractures in the crystalline rock determines the well yield. The weathered rock acts as a storage area for ground water. Thickness of this layer varies from zero on steep ridge tops to more than 90 feet in valleys (Ref. 6). Individual aquifers are found in local fracture systems and are not laterally extensive (Ref. 4).

The facility is located at the crest of a small hill and has its predominate drainage to the southeast. The land both onsite and in adjacent properties has a 7% slope towards the southeast. Surface run off empties into an intermittent stream which is located 600 feet from the rear of the building structures. This intermittent stream connects to the Eastanolles Creek approximately 4000 feet from the facility.

.Groundwater use in the area is limited due to the low yield of wells, and the abundance of surface water sources (Refs. 4, 7, 8). Typical well yields are between 1 and 25 gallons per minute (gpm), though yields of up to 400 gpm have been reported. Depth to the water bearing zone varies between 60 and 350 feet, and is strongly influenced by local surface topography (Ref. 7).

The city of Toccoa is served by a municipal water system which has its supply intake located approximately six miles north (up gradient) of the site at Yonah Lake. Residents not served by the municipal water system obtain their water from private wells. An area survey reveals that approximately 194 homes within a three mile radius rely on private wells for potable water (Ref. 9). Approximately 80% of these wells have an average depth of 60 feet. The remaining 39 wells range in depth from 300-350 feet. Both shallow and deep wells are completed in crystalline rock aquifers (Ref. 4).

Shipment of waste off-site greatly reduces the potential for contamination of groundwater, surface water, or air migration pathways at the facility. There are no indications that disposals, spills or releases of hazardous substances have occurred at the site. Based upon the above referenced material, it is recommended that no further remedial acton be planned for the Vermont American Corporation facility. If you have any questions regarding this assessment please feel free to contact me at NUS Corporation.

Very truly yours,

Terry L Tanner
Project Manager

Approved:

TLT/dw

Enclosures

cc: Mario Villamarzo

References

1. Burns, B., 1984. Trip report. Vermont American Corporation.

2. Taylor, J., 1983. Application letter for generator status. Department of the Industrial and Hazardous Waste Management Program.

3. Knowles, G. 1985. USEPA Potential Hazardous Waste Site, Preliminary Assessment, Vermont American Corporation, Toccoa, Georgia.

4. USGS, 1984. National Water Summary 1984, USGS WRI-2275.

5. Georgia Geologic Survey, 1976. Geologic Map of Georgia.

6. LeGrand, H.E., 1967. Groundwater of the Piedmont and Blue Ridge Provinces in the Southeastern States. USGS IC 538.

7. Souderegger, J., 1978. Quality and Availability of Ground water in Georgia. USGS IC-48.

8. Pierce, R., 1970. Water Use in Georgia by County for 1980. Georgia Geological Survey IC-59.

9. Topographic Quadrangles: Avalon, GA (1963); Martin, GA (1960); Red Hill, GA (1964); Toccoa, GA (1964).

RECONNAISSANCE CHECKLIST FOR HRS2 CONCERNS

Instructions: Obtain as much "up front" information as possible prior to conducting fieldwork. Complete the form in as much detail as you can, providing attachments as necessary. Cite the source for all information obtained.

Site name: VERMONT AMERICAN CORPORATION
City, County, State: TOCCOA, STEPHENS COUNTY, GEORGIA
EPA ID No.: F4-8802-28
Person responsible for form: TERRY TANNER
Date: 4-7-88

Air Pathway

Describe any potential air emission sources onsite: No potential sources sited during area recon (REF 1)

Identify any sensitive environments within 4 miles: No evidence of sensitive environments within 4 miles (REF 2)

Identify the maximally exposed individual (nearest residence or regularly occupied building - workers do count): Workers employed by the Vermont American Corporation. (REF 1)

Groundwater Pathway

Identify any areas of karst terrain: None located in the Piedmont Physiographic Province of Georgia (REF 3).

Identify additional population due to consideration of wells completed in overlying aquifers to the AOC: The Piedmont-Physiographic Province of Georgia is composed of Crystalline Rock Aquifers. Individual aquifers are formed in local fracture systems and are are not laterally extensive (REF 3).

Do significant targets exist between 3 and 4 miles from the site? Approximately 185 homes utilize private wells in the 3 to 4 mile area of the site. No municiple wells exist within a 4 mile radius (REF 2

Is the AOC a sole source aquifer according to Safe Drinking Water Act? (i.e. is the site located in Dade, Broward, Volusia, Putnam, or Flager County, Florida)

N/A (REF 2)

Surface Water Pathway

Are there intakes located on the extended 15-mile migration pathway?
No intakes are located on the extended 15-mile pathway (REF 2+4)

Are there recreational areas, sensitive environments, or human food chain targets (fisheries) along the extended pathway? None are indicated (REF 2).

Onsite Exposure Pathway

Is there waste or contaminated soil onsite at 2 feet below land surface or higher? Waste is held temporarily held and shipped off site for disposal every 90 days (REF 5).

Is the site accessible to non-employees (workers do not count)?
Area not visable from the street (REF 1).

Are there residences, schools, or daycare centers onsite or in close proximity?
Several houses (approximately 61) are located with a one mile radius of the site (REF 2).

Are there barriers to travel (e.g., a river) within one mile?

NO (REF 2)

REFERENCES

1. Walker, S. 1988. Area recon of Vermont American Corp. Log book No. F4-729.
2. U.S.G.S. Topographic Quadrangles: Avalon, GA (1965); Martin, GA (1960); Red Hill, GA (1964); Jocona, GA (1964).
3. U.S.G.S., 1984. National Water Summary. U.S.G.S. WRI-2275
4. Piedmont Paints and Primer Logbook F4-726. Meeting with assistant water superintendent of Jocona, Georgia, on 3-24-88
5. Burns, B. 1984. Trip Report on Vermont American Corporation.

HAZARD RANKING SYSTEM SCORING SUMMARY

FOR

VERMONT AMERICAN CORPORATION
EPA SITE NUMBER GAD084362636
TOCCOA
STEPHENS COUNTY, GA
EPA REGION: 4

SCORE STATUS: IN PREPARATION

SCORED BY TERRY TANNER
OF NUS CORPORATION
ON 03/25/88

DATE OF THIS REPORT: 05/03/88
DATE OF LAST MODIFICATION: 05/03/88

GROUND WATER ROUTE SCORE	:	24.87
SURFACE WATER ROUTE SCORE	:	2.69
AIR ROUTE SCORE	:	0.00
MIGRATION SCORE	:	14.46

HRS GROUND WATER ROUTE SCORE

CATEGORY/FACTOR	RAW DATA	ASN. VALUE	SCORE
1. OBSERVED RELEASE	NO	0	0
2. ROUTE CHARACTERISTICS			
DEPTH TO WATER TABLE	60 FEET		
DEPTH TO BOTTOM OF WASTE	0 FEET		
DEPTH TO AQUIFER OF CONCERN	60 FEET	2	4
PRECIPITATION	60.0 INCHES		
EVAPORATION	39.0 INCHES		
NET PRECIPITATION	21.0 INCHES	3	3
PERMEABILITY	1.0X10-3 CM/SEC	2	2
PHYSICAL STATE		3	3
TOTAL ROUTE CHARACTERISTICS SCORE:			12
3. CONTAINMENT		3	3
4. WASTE CHARACTERISTICS			
TOXICITY/PERSISTENCE:CHROMIUM			18
WASTE QUANTITY CUBIC YDS	0		
DRUMS	0		
GALLONS	0		
TONS	0		
TOTAL	0 CU. YDS	0	0
TOTAL WASTE CHARACTERISTICS SCORE:			18
5. TARGETS			
GROUND WATER USE		2	6
DISTANCE TO NEAREST WELL	3000 FEET		
AND	MATRIX VALUE	16	16
TOTAL POPULATION SERVED	737 PERSONS		
NUMBER OF HOUSES	194		
NUMBER OF PERSONS	0		
NUMBER OF CONNECTIONS	0		
NUMBER OF IRRIGATED ACRES	0		
TOTAL TARGETS SCORE:			22

GROUND WATER ROUTE SCORE (Sgw) = 24.87

HRS SURFACE WATER ROUTE SCORE

CATEGORY/FACTOR	RAW DATA	ASN. VALUE	SCORE
1. OBSERVED RELEASE	NO	0	0
2. ROUTE CHARACTERISTICS			
SITE LOCATED IN SURFACE WATER	NO		
SITE WITHIN CLOSED BASIN	NO		
FACILITY SLOPE	0.0 %		
INTERVENING SLOPE	0.0 %	0	0
24-HOUR RAINFALL	2.5 INCHES	2	2
DISTANCE TO DOWN-SLOPE WATER	3000 FEET	2	4
PHYSICAL STATE	2		2
TOTAL ROUTE CHARACTERISTICS SCORE:			8
3. CONTAINMENT	1		1
4. WASTE CHARACTERISTICS			
TOXICITY/PERSISTENCE:CHROMIUM			18
WASTE QUANTITY CUBIC YDS	0		
DRUMS	0		
GALLONS	0		
TONS	0		
TOTAL	0 CU. YDS	0	0
TOTAL WASTE CHARACTERISTICS SCORE:			18
5. TARGETS			
SURFACE WATER USE		2	6
DISTANCE TO SENSITIVE ENVIRONMENTS		3	6
COASTAL WETLANDS	0 FEET		
FRESH-WATER WETLANDS	7500 FEET		
CRITICAL HABITAT	0 FEET		
DISTANCE TO STATIC WATER	7000 FEET		
DISTANCE TO WATER SUPPLY INTAKE	26000 FEET		
AND	MATRIX VALUE	0	0
TOTAL POPULATION SERVED	0		
NUMBER OF HOUSES	0		
NUMBER OF PERSONS	0		
NUMBER OF CONNECTIONS	0		
NUMBER OF IRRIGATED ACRES	0		
TOTAL TARGETS SCORE:			12

SURFACE WATER ROUTE SCORE (Ssw) = 2.69

HRS AIR ROUTE SCORE

CATEGORY/FACTOR	RAW DATA	ASN. VALUE	SCORE
1. OBSERVED RELEASE	NO	0	0

2. WASTE CHARACTERISTICS

REACTIVITY: MATRIX VALUE

INCOMPATIBILITY

TOXICITY

WASTE QUANTITY CUBIC YARDS
DRUMS
GALLONS
TONS

TOTAL

TOTAL WASTE CHARACTERISTICS SCORE: N/A

3. TARGETS

POPULATION WITHIN 4-MILE RADIUS
0 to 0.25 mile
0 to 0.50 mile
0 to 1.0 mile
0 to 4.0 miles

DISTANCE TO SENSITIVE ENVIRONMENTS
COASTAL WETLANDS
FRESH-WATER WETLANDS
CRITICAL HABITAT

DISTANCE TO LAND USES
COMMERCIAL/INDUSTRIAL
PARK/FOREST/RESIDENTIAL
AGRICULTURAL LAND
PRIME FARMLAND
HISTORIC SITE WITHIN VIEW?

TOTAL TARGETS SCORE: N/A

AIR ROUTE SCORE (Sa) = 0.00

HAZARD RANKING SYSTEM SCORING CALCULATIONS
FOR
SITE: VERMONT AMERICAN CORPORATION
AS OF 05/03/88

GROUND WATER ROUTE SCORE

ROUTE CHARACTERISTICS		12					
CONTAINMENT	X	3					
WASTE CHARACTERISTICS	X	18					
TARGETS	X	22					
	=	14256	/57,330	X	100	= 24.87	= S_{gw}

SURFACE WATER ROUTE SCORE

ROUTE CHARACTERISTICS		8					
CONTAINMENT	X	1					
WASTE CHARACTERISTICS	X	18					
TARGETS	X	12					
	=	1728	/64,350	X	100	= 2.69	= S_{sw}

AIR ROUTE SCORE

OBSERVED RELEASE		0	/35,100	X	100	= 0.00	= S_{air}

SUMMARY OF MIGRATION SCORE CALCULATIONS

	S	S^2
GROUND WATER ROUTE SCORE (S_{gw})	24.87	618.52
SURFACE WATER ROUTE SCORE (S_{sw})	2.69	7.24
AIR ROUTE SCORE (S_{air})	0.00	0.00
$S^2_{gw} + S^2_{sw} + S^2_{air}$		625.76
$\sqrt{(S^2_{gw} + S^2_{sw} + S^2_{air})}$		25.02
$S_M = \sqrt{(S^2_{gw} + S^2_{sw} + S^2_{air})}/1.73$		14.46

United States
Environmental Protection
Agency

Office of Emergency and
Remedial Response
Washington, DC 20460

EPA Form 2070-13
July, 1981

EPA

Potential Hazardous Waste Site

Site Inspection Report

Site Inspection Report

POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 1 - SITE LOCATION AND INSPECTION INFORMATION

EPA

I. IDENTIFICATION

01 STATE	02 SITE NUMBER
GA	DOR4362656

II. SITE NAME AND LOCATION

01 SITE NAME (Legal, common, or descriptive name of site)	02 STREET, ROUTE NO., OR SPECIFIC LOCATION IDENTIFIER
VERMONT AMERICAN CORP - TOCCOA DIV	P.O. BOX 787, MEADOWBROOK INDUST. PK.

03 CITY	04 STATE	05 ZIP CODE	06 COUNTY	07 COUNTY CODE	08 CONG DIST
TOCCOA	GA	30577	STEPHENS	257	09

09 COORDINATES LATITUDE	LONGITUDE
34° 33' 42.0	083° 19' 18.2

10 TYPE OF OWNERSHIP (Check one)
☑ A. PRIVATE ☐ B. FEDERAL _____ ☐ C. STATE ☐ D. COUNTY ☐ E. MUNICIPAL
☐ F. OTHER _____ ☐ G. UNKNOWN

III. INSPECTION INFORMATION

01 DATE OF INSPECTION	02 SITE STATUS	03 YEARS OF OPERATION
03 24 88 (MONTH DAY YEAR)	☑ ACTIVE ☐ INACTIVE	1977 (BEGINNING YEAR) PRESENT (ENDING YEAR) ___ UNKNOWN

04 AGENCY PERFORMING INSPECTION (Check all that apply)
☐ A. EPA ☑ B. EPA CONTRACTOR NUS CORP. (Name of firm) ☐ C. MUNICIPAL ☐ D. MUNICIPAL CONTRACTOR _____ (Name of firm)
☐ E. STATE ☐ F. STATE CONTRACTOR _____ (Name of firm) ☐ G. OTHER _____ (Specify)

05 CHIEF INSPECTOR	06 TITLE	07 ORGANIZATION	08 TELEPHONE NO
STEVE WALKER	GEOLOGIST	NUS CORP	(404) 938-7710
09 OTHER INSPECTORS	10 TITLE	11 ORGANIZATION	12 TELEPHONE NO
JOHN MORROW	CHEMIST	NUS CORP	(404) 938-7710
			( )
			( )
			( )
			( )

13 SITE REPRESENTATIVES INTERVIEWED	14 TITLE	15 ADDRESS	16 TELEPHONE NO
N/A			( )
			( )
			( )
			( )
			( )
			( )

17 ACCESS GAINED BY (Check one)	18 TIME OF INSPECTION	19 WEATHER CONDITIONS
☐ PERMISSION ☐ WARRANT (N/A)	13:35 HRS	SUNNY WEATHER

IV. INFORMATION AVAILABLE FROM

01 CONTACT	02 OF (Agency/Organization)	03 TELEPHONE NO
TERRY TANNER	NUS CORPORATION	(404) 938-7710

04 PERSON RESPONSIBLE FOR SITE INSPECTION FORM	05 AGENCY	06 ORGANIZATION	07 TELEPHONE NO.	08 DATE
TERRY TANNER	NUS CORP.		(404) 938-7710	4 8 88 (MONTH DAY YEAR)

EPA FORM 2070-13 (7-81)

EPA

POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 2 - WASTE INFORMATION

I. IDENTIFICATION

01 STATE	02 SITE NUMBER
GA	D0843626SG

II. WASTE STATES, QUANTITIES, AND CHARACTERISTICS

01 PHYSICAL STATES (Check all that apply)

- ☐ A. SOLID
- ☐ B. POWDER, FINES
- ☑ C. SLUDGE
- ☑ E. SLURRY
- ☑ F. LIQUID
- ☐ G. GAS
- ☐ D. OTHER _____ (Specify)

02 WASTE QUANTITY AT SITE (Measures of waste quantities must be independent)

- TONS _____
- CUBIC YARDS UNKNOWN
- NO. OF DRUMS _____

03 WASTE CHARACTERISTICS (Check all that apply)

- ☑ A. TOXIC
- ☐ B. CORROSIVE
- ☐ C. RADIOACTIVE
- ☐ D. PERSISTENT
- ☐ E. SOLUBLE
- ☑ F. INFECTIOUS
- ☑ G. FLAMMABLE
- ☐ H. IGNITABLE
- ☐ I. HIGHLY VOLATILE
- ☐ J. EXPLOSIVE
- ☐ K. REACTIVE
- ☐ L. INCOMPATIBLE
- ☐ M. NOT APPLICABLE

III. WASTE TYPE

CATEGORY	SUBSTANCE NAME	01 GROSS AMOUNT	02 UNIT OF MEASURE	03 COMMENTS
SLU	SLUDGE	2640	LBS.	VOLUME WEIGHT / MONTH
OLW	OILY WASTE			
SOL	SOLVENTS			
PSD	PESTICIDES			
OCC	OTHER ORGANIC CHEMICALS			
IOC	INORGANIC CHEMICALS			
ACD	ACIDS			
BAS	BASES			
MES	HEAVY METALS			

IV. HAZARDOUS SUBSTANCES (See Appendix for most frequently cited CAS Numbers)

01 CATEGORY	02 SUBSTANCE NAME	03 CAS NUMBER	04 STORAGE/DISPOSAL METHOD	05 CONCENTRATION	06 MEASURE OF CONCENTRATION
SLU	CHROMIUM / SLUDGE	7440-4703	DRUMS / SCA CHEM	UNKNOWN	
	SPENT SOLUTIONS				

V. FEEDSTOCKS (See Appendix for CAS Numbers)

CATEGORY	01 FEEDSTOCK NAME	02 CAS NUMBER	CATEGORY	01 FEEDSTOCK NAME	02 CAS NUMBER
FDS			FDS		
FDS			FDS		
FDS			FDS		
FDS			FDS		

VI. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis, reports)

GA EPD STATE FILES
VERMONT AMERICAN CORP. TOCCOA, GA.

EPA

POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION
01 STATE: GA | 02 SITE NUMBER: GAD 436 365 6

II. HAZARDOUS CONDITIONS AND INCIDENTS

01 ☐ A. GROUNDWATER CONTAMINATION — 02 ☐ OBSERVED (DATE: _____) — ☑ POTENTIAL — ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: 734
04 NARRATIVE DESCRIPTION
Approximately 194 houses surround the site within a three mile radius.

01 ☑ B. SURFACE WATER CONTAMINATION — 02 ☐ OBSERVED (DATE: _____) — ☑ POTENTIAL — ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: 3.8
04 NARRATIVE DESCRIPTION
Only one household located approximately 2.5 miles from the site is known to use surface water in the form of a spring.

01 ☐ C. CONTAMINATION OF AIR — 02 ☐ OBSERVED (DATE: _____) — ☐ POTENTIAL — ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____
04 NARRATIVE DESCRIPTION
N/A

01 ☑ D. FIRE/EXPLOSIVE CONDITIONS — 02 ☐ OBSERVED (DATE: _____) — ☑ POTENTIAL — ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: WORKERS
04 NARRATIVE DESCRIPTION
Ink contaminated lacquer thinner waste would prove to be a potential fire hazard to workers employed at the facility

01 ☑ E. DIRECT CONTACT — 02 ☐ OBSERVED (DATE: _____) — ☑ POTENTIAL — ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: WORKERS
04 NARRATIVE DESCRIPTION
Workers involved in handling the waste.

01 ☐ F. CONTAMINATION OF SOIL — 02 ☐ OBSERVED (DATE: _____) — ☐ POTENTIAL — ☐ ALLEGED
03 AREA POTENTIALLY AFFECTED: _____ (Acres)
04 NARRATIVE DESCRIPTION
N/A

01 ☑ G. DRINKING WATER CONTAMINATION — 02 ☐ OBSERVED (DATE: _____) — ☑ POTENTIAL — ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: 734
04 NARRATIVE DESCRIPTION
Approximately 194 houses surrounding the site obtain potable water from

01 ☐ H. WORKER EXPOSURE/INJURY — 02 ☐ OBSERVED (DATE: _____) — ☐ POTENTIAL — ☐ ALLEGED
03 WORKERS POTENTIALLY AFFECTED: _____
04 NARRATIVE DESCRIPTION
Information not available

01 ☐ I. POPULATION EXPOSURE/INJURY — 02 ☐ OBSERVED (DATE: _____) — ☐ POTENTIAL — ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____
04 NARRATIVE DESCRIPTION
Information not available

EPA

POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE	02 SITE NUMBER
GA	D084363656

II. HAZARDOUS CONDITIONS AND INCIDENTS (Continued)

01 ☐ J. DAMAGE TO FLORA — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION

N/A

01 ☐ K. DAMAGE TO FAUNA — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION (Include name(s) of species)

N/A

01 ☐ L. CONTAMINATION OF FOOD CHAIN — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION

N/A

01 ☐ M. UNSTABLE CONTAINMENT OF WASTES (Spills/Runoff/Standing liquids/Leaking drums) — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

N/A

01 ☐ N. DAMAGE TO OFFSITE PROPERTY — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION

N/A

01 ☐ O. CONTAMINATION OF SEWERS, STORM DRAINS, WWTPs — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION

N/A

01 ☐ P. ILLEGAL/UNAUTHORIZED DUMPING — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION

N/A

05 DESCRIPTION OF ANY OTHER KNOWN, POTENTIAL, OR ALLEGED HAZARDS

N/A

III. TOTAL POPULATION POTENTIALLY AFFECTED: 2,766 people within a 3 mile radius.

IV. COMMENTS

V. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analyses, reports)

Burns, B. 1984. Trip Report to Vermont American Corp. EPA Files.
Knowles, G. 1985 U.S. EPA Potential Hazardous Waste Site, Preliminary Assessment (EPA FILES).

EPA

POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION
PART 4 - PERMIT AND DESCRIPTIVE INFORMATION

I. IDENTIFICATION	
01 STATE	02 SITE NUMBER

II. PERMIT INFORMATION

01 TYPE OF PERMIT ISSUED (Check all that apply)	02 PERMIT NUMBER	03 DATE ISSUED	04 EXPIRATION DATE	05 COMMENTS
☐ A. NPDES				
☐ B. UIC				
☐ C. AIR				
☐ D. RCRA				
☐ E. RCRA INTERIM STATUS				
☐ F. SPCC PLAN				
☐ G. STATE (Specify)				
☐ H. LOCAL (Specify)				
☐ I. OTHER (Specify)				
☐ J. NONE				

III. SITE DESCRIPTION

01 STORAGE/DISPOSAL (Check all that apply)	02 AMOUNT	03 UNIT OF MEASURE
☐ A. SURFACE IMPOUNDMENT		
☐ B. PILES		
☐ C. DRUMS, ABOVE GROUND	25	GAL/MONTH
☐ D. TANK, ABOVE GROUND		
☐ E. TANK, BELOW GROUND		
☐ F. LANDFILL		
☐ G. LANDFARM		
☐ H. OPEN DUMP		
☐ I. OTHER (Specify)		

04 TREATMENT (Check all that apply)

- ☐ A. INCENERATION
- ☐ B. UNDERGROUND INJECTION
- ☐ C. CHEMICAL/PHYSICAL
- ☐ D. BIOLOGICAL
- ☐ E. WASTE OIL PROCESSING
- ☐ F. SOLVENT RECOVERY
- ☐ G. OTHER RECYCLING/RECOVERY
- ☐ H. OTHER (Specify)

05 OTHER

- ☐ A. BUILDINGS ON SITE

06 AREA OF SITE

_____ (Acres)

07 COMMENTS

The facility stores the waste on a temporary basis on-site and is eventually shipped every 90 days to SCA Services of Pinewood, South Carolina for disposal.

IV. CONTAINMENT

01 CONTAINMENT OF WASTES (Check one)

☐ A. ADEQUATE, SECURE ☐ B. MODERATE ☐ C. INADEQUATE, POOR ☐ D. INSECURE, UNSOUND, DANGEROUS

02 DESCRIPTION OF DRUMS, DIKING, LINERS, BARRIERS, ETC.

Condition of drums and the temporary storage is unknown.

V. ACCESSIBILITY

01 WASTE EASILY ACCESSIBLE. ☐ YES ☐ NO

02 COMMENTS

N/A

VI. SOURCES OF INFORMATION (Cite specific references, e.g. state files, sample analysis, reports)

Burns, B. 1984. Trip Report of Vermont American Corp (EPA files).

POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 5 - WATER, DEMOGRAPHIC, AND ENVIRONMENTAL DATA

EPA

I. IDENTIFICATION

01 STATE	02 SITE NUMBER
GA	D084363656

II. DRINKING WATER SUPPLY

01 TYPE OF DRINKING SUPPLY (Check as applicable)	SURFACE	WELL
COMMUNITY	A. ☑	B. ☐
NON-COMMUNITY	C. ☐	D. ☐

02 STATUS	ENDANGERED	AFFECTED	MONITORED
	A. ☐	B. ☐	C. ☐
	D. ☐	E. ☐	F. ☐

03 DISTANCE TO SITE
A. 6 (mi)
B. _____ (mi)

III. GROUNDWATER

01 GROUNDWATER USE IN VICINITY (Check one)

☑ A. ONLY SOURCE FOR DRINKING ☐ B. DRINKING (Other sources available) COMMERCIAL, INDUSTRIAL, IRRIGATION (No other water sources available) ☐ C. COMMERCIAL, INDUSTRIAL, IRRIGATION (Limited other sources available) ☐ D. NOT USED, UNUSEABLE

02 POPULATION SERVED BY GROUND WATER 737.

03 DISTANCE TO NEAREST DRINKING WATER WELL 0.3 (mi)

04 DEPTH TO GROUNDWATER	05 DIRECTION OF GROUNDWATER FLOW	06 DEPTH TO AQUIFER OF CONCERN	07 POTENTIAL YIELD OF AQUIFER	08 SOLE SOURCE AQUIFER
60 (ft)	SOUTHEAST	UNK (ft)	36,000 (gpd)	☐ YES ☑ NO

09 DESCRIPTION OF WELLS (Including useage, depth, and location relative to population and buildings)

Approximately 194 homes within a 3 mile radius utilize private wells. About 80% of these wells have an average depths of 60 feet while the remainder average in depth from 300 - 350 feet.

10 RECHARGE AREA		11 DISCHARGE AREA	
☐ YES ☐ NO	COMMENTS	☐ YES ☐ NO	COMMENTS

IV. SURFACE WATER

01 SURFACE WATER USE (Check one)

☐ A. RESERVOIR, RECREATION DRINKING WATER SOURCE ☐ B. IRRIGATION, ECONOMICALLY IMPORTANT RESOURCES ☐ C. COMMERCIAL, INDUSTRIAL ☐ D. NOT CURRENTLY USED

02 AFFECTED/POTENTIALLY AFFECTED BODIES OF WATER

NAME:	AFFECTED	DISTANCE TO SITE
_____	☐	_____ (mi)
_____	☐	_____ (mi)
_____	☐	_____ (mi)

V. DEMOGRAPHIC AND PROPERTY INFORMATION

01 TOTAL POPULATION WITHIN

ONE (1) MILE OF SITE	TWO (2) MILES OF SITE	THREE (3) MILES OF SITE
A. 232 NO. OF PERSONS	B. ~~930~~ 962 NO. OF PERSONS	C. 2767 NO. OF PERSONS

02 DISTANCE TO NEAREST POPULATION
0.3 (mi)

03 NUMBER OF BUILDINGS WITHIN TWO (2) MILES OF SITE	04 DISTANCE TO NEAREST OFF-SITE BUILDING
N/A	0.3 (mi)

05 POPULATION WITHIN VICINITY OF SITE (Provide narrative description of nature of population within vicinity of site, e.g., rural, village, densely populated urban area)

Sparely populated rural area containing a few, small privately owned business's

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POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 5 - WATER, DEMOGRAPHIC, AND ENVIRONMENTAL DATA

I. IDENTIFICATION

01 STATE	02 SITE NUMBER

VI. ENVIRONMENTAL INFORMATION

01 PERMEABILITY OF UNSATURATED ZONE *(Check one)*

☐ A. $10^{-6} - 10^{-8}$ cm/sec ☐ B. $10^{-4} - 10^{-6}$ cm/sec ☑ C. $10^{-4} - 10^{-3}$ cm/sec ☐ D. GREATER THAN 10^{-3} cm/sec

02 PERMEABILITY OF BEDROCK *(Check one)*

☐ A. IMPERMEABLE *(Less than 10^{-6} cm/sec)* ☐ B. RELATIVELY IMPERMEABLE *($10^{-4} - 10^{-6}$ cm/sec)* ☐ C. RELATIVELY PERMEABLE *($10^{-2} - 10^{-4}$ cm/sec)* ☐ D. VERY PERMEABLE *(Greater than 10^{-2} cm/sec)*

03 DEPTH TO BEDROCK	04 DEPTH OF CONTAMINATED SOIL ZONE	05 SOIL pH	
_____ (ft)	_____ (ft)	_____	

06 NET PRECIPITATION	07 ONE YEAR 24 HOUR RAINFALL	08 SLOPE: SITE SLOPE	DIRECTION OF SITE SLOPE	TERRAIN AVERAGE SLOPE
60 (in)/YEAR	2.5 (in)	<3% %	SOUTH EAST	_____ %

09 FLOOD POTENTIAL

SITE IS IN _____ YEAR FLOODPLAIN

10 ☐ SITE IS ON BARRIER ISLAND, COASTAL HIGH HAZARD AREA, RIVERINE FLOODWAY

11 DISTANCE TO WETLANDS *(5 acre minimum)*

ESTUARINE: A. _____ (mi)

OTHER: B. 1.7 (mi)

12 DISTANCE TO CRITICAL HABITAT *(of endangered species)*

N/A (mi)

ENDANGERED SPECIES: N/A

13 LAND USE IN VICINITY

DISTANCE TO:

COMMERCIAL/INDUSTRIAL	RESIDENTIAL AREAS; NATIONAL/STATE PARKS, FORESTS, OR WILDLIFE RESERVES	AGRICULTURAL LANDS: PRIME AG LAND	AG LAND
A. _____ (mi)	B. _____ (mi)	C. _____ (mi)	D. _____ (mi)

14 DESCRIPTION OF SITE IN RELATION TO SURROUNDING TOPOGRAPHY

VII. SOURCES OF INFORMATION *(Cite specific references, e.g., state files, sample analysis, reports)*

EPA

POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 6 - SAMPLE AND FIELD INFORMATION

I. IDENTIFICATION	
01 STATE	02 SITE NUMBER

II. SAMPLES TAKEN

SAMPLE TYPE	01 NUMBER OF SAMPLES TAKEN	02 SAMPLES SENT TO	03 ESTIMATED DATE RESULTS AVAILABLE
GROUNDWATER	N/A		
SURFACE WATER	↓		
WASTE			
AIR			
RUNOFF			
SPILL			
SOIL			
VEGETATION			
OTHER	↓		

III. FIELD MEASUREMENTS TAKEN

01 TYPE	02 COMMENTS
N/A	
↓	

IV. PHOTOGRAPHS AND MAPS

01 TYPE ☒ GROUND ☐ AERIAL

02 IN CUSTODY OF NUS CORP.
(Name of organization or individual)

03 MAPS ☒ YES ☐ NO

04 LOCATION OF MAPS Avalon, GA; Martin, GA; RED HILL, GA; TOCCOA, GA.

V. OTHER FIELD DATA COLLECTED (Provide narrative description)

N/A

VI. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis, reports)

1) USGS Topographic Quadrangle.

2) Site Recon. Steve Walker of NUS Corp. 1988.

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POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 7 - OWNER INFORMATION

I. IDENTIFICATION	
01 STATE	02 SITE NUMBER

II. CURRENT OWNER(S)

01 NAME	02 D+B NUMBER	04 SIC CODE
03 STREET ADDRESS (P.O. Box, RFD #, etc.)		
05 CITY	06 STATE	07 ZIP CODE
01 NAME	02 D+B NUMBER	04 SIC CODE
03 STREET ADDRESS (P.O. Box, RFD #, etc.)		
05 CITY	06 STATE	07 ZIP CODE
01 NAME	02 D+B NUMBER	04 SIC CODE
03 STREET ADDRESS (P.O. Box, RFD #, etc.)		
05 CITY	06 STATE	07 ZIP CODE
01 NAME	02 D+B NUMBER	04 SIC CODE
03 STREET ADDRESS (P.O. Box, RFD #, etc.)		
05 CITY	06 STATE	07 ZIP CODE

PARENT COMPANY (If applicable)

08 NAME	09 D+B NUMBER	11 SIC CODE
10 STREET ADDRESS (P.O. Box, RFD #, etc.)		
12 CITY	13 STATE	14 ZIP CODE
08 NAME	09 D+B NUMBER	11 SIC CODE
10 STREET ADDRESS (P.O. Box, RFD #, etc.)		
12 CITY	13 STATE	14 ZIP CODE
08 NAME	09 D+B NUMBER	11 SIC CODE
10 STREET ADDRESS (P.O. Box, RFD #, etc.)		
12 CITY	13 STATE	14 ZIP CODE
08 NAME	09 D+B NUMBER	11 SIC CODE
10 STREET ADDRESS (P.O. Box, RFD #, etc.)		
12 CITY	13 STATE	14 ZIP CODE

III. PREVIOUS OWNER(S) (List most recent first)

01 NAME	02 D+B NUMBER	04 SIC CODE
03 STREET ADDRESS (P.O. Box, RFD #, etc.)		
05 CITY	06 STATE	07 ZIP CODE
01 NAME	02 D+B NUMBER	04 SIC CODE
03 STREET ADDRESS (P.O. Box, RFD #, etc.)		
05 CITY	06 STATE	07 ZIP CODE
01 NAME	02 D+B NUMBER	04 SIC CODE
03 STREET ADDRESS (P.O. Box, RFD #, etc.)		
05 CITY	06 STATE	07 ZIP CODE

IV. REALTY OWNER(S) (If applicable. list most recent first)

01 NAME	02 D+B NUMBER	04 SIC CODE
03 STREET ADDRESS (P.O. Box, RFD #, etc.)		
05 CITY	06 STATE	07 ZIP CODE
01 NAME	02 D+B NUMBER	04 SIC CODE
03 STREET ADDRESS (P.O. Box, RFD #, etc.)		
05 CITY	06 STATE	07 ZIP CODE
01 NAME	02 D+B NUMBER	04 SIC CODE
03 STREET ADDRESS (P.O. Box, RFD #, etc.)		
05 CITY	06 STATE	07 ZIP CODE

V. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis, reports)

N/A

EPA

POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 8 - OPERATOR INFORMATION

I. IDENTIFICATION	
01 STATE	02 SITE NUMBER

II. CURRENT OPERATOR (Provide if different from owner)

01 NAME	02 D+B NUMBER
03 STREET ADDRESS (P.O. Box, RFD #, etc.)	04 SIC CODE
05 CITY	06 STATE / 07 ZIP CODE
08 YEARS OF OPERATION	09 NAME OF OWNER

OPERATOR'S PARENT COMPANY (If applicable)

10 NAME	11 D+B NUMBER
12 STREET ADDRESS (P.O. Box, RFD #, etc.)	13 SIC CODE
14 CITY	15 STATE / 16 ZIP CODE

III. PREVIOUS OPERATOR(S) (List most recent first; provide only if different from owner)

01 NAME	02 D+B NUMBER
03 STREET ADDRESS (P.O. Box, RFD #, etc.)	04 SIC CODE
05 CITY	06 STATE / 07 ZIP CODE
08 YEARS OF OPERATION	09 NAME OF OWNER DURING THIS PERIOD
01 NAME	02 D+B NUMBER
03 STREET ADDRESS (P.O. Box, RFD #, etc.)	04 SIC CODE
05 CITY	06 STATE / 07 ZIP CODE
08 YEARS OF OPERATION	09 NAME OF OWNER DURING THIS PERIOD
01 NAME	02 D+B NUMBER
03 STREET ADDRESS (P.O. Box, RFD #, etc.)	04 SIC CODE
05 CITY	06 STATE / 07 ZIP CODE
08 YEARS OF OPERATION	09 NAME OF OWNER DURING THIS PERIOD

PREVIOUS OPERATORS' PARENT COMPANIES (If applicable)

10 NAME	11 D+B NUMBER
12 STREET ADDRESS (P.O. Box, RFD #, etc.)	13 SIC CODE
14 CITY	15 STATE / 16 ZIP CODE
10 NAME	11 D+B NUMBER
12 STREET ADDRESS (P.O. Box, RFD #, etc.)	13 SIC CODE
14 CITY	15 STATE / 16 ZIP CODE
10 NAME	11 D+B NUMBER
12 STREET ADDRESS (P.O. Box, RFD #, etc.)	13 SIC CODE
14 CITY	15 STATE / 16 ZIP CODE

IV. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis, reports)

N/A

EPA

POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 9 - GENERATOR/TRANSPORTER INFORMATION

I. IDENTIFICATION

01 STATE	02 SITE NUMBER
GA	D084362656

II. ON-SITE GENERATOR

01 NAME	02 D+B NUMBER
VERMONT AMERICAN	

03 STREET ADDRESS (P.O. Box, RFD #, etc.)	04 SIC CODE
P.O. Box 787	34-25

05 CITY	06 STATE	07 ZIP CODE
TOCCOA	GA	30577

III. OFF-SITE GENERATOR(S)

01 NAME	02 D+B NUMBER	01 NAME	02 D+B NUMBER

03 STREET ADDRESS (P.O. Box, RFD #, etc.)	04 SIC CODE	03 STREET ADDRESS (P.O. Box, RFD #, etc.)	04 SIC CODE

05 CITY	06 STATE	07 ZIP CODE	05 CITY	06 STATE	07 ZIP CODE

01 NAME	02 D+B NUMBER	01 NAME	02 D+B NUMBER

03 STREET ADDRESS (P.O. Box, RFD #, etc.)	04 SIC CODE	03 STREET ADDRESS (P.O. Box, RFD #, etc.)	04 SIC CODE

05 CITY	06 STATE	07 ZIP CODE	05 CITY	06 STATE	07 ZIP CODE

IV. TRANSPORTER(S)

01 NAME	02 D+B NUMBER	01 NAME	02 D+B NUMBER

03 STREET ADDRESS (P.O. Box, RFD #, etc.)	04 SIC CODE	03 STREET ADDRESS (P.O. Box, RFD #, etc.)	04 SIC CODE

05 CITY	06 STATE	07 ZIP CODE	05 CITY	06 STATE	07 ZIP CODE

01 NAME	02 D+B NUMBER	01 NAME	02 D+B NUMBER

03 STREET ADDRESS (P.O. Box, RFD #, etc.)	04 SIC CODE	03 STREET ADDRESS (P.O. Box, RFD #, etc.)	04 SIC CODE

05 CITY	06 STATE	07 ZIP CODE	05 CITY	06 STATE	07 ZIP CODE

V. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis, reports)

~~N/A~~

Generator Annual Hazardous Waste Report.

EPA

POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 10 - PAST RESPONSE ACTIVITIES

I. IDENTIFICATION	
01 STATE	02 SITE NUMBER

II. PAST RESPONSE ACTIVITIES

01 ☐ A. WATER SUPPLY CLOSED — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

01 ☐ B. TEMPORARY WATER SUPPLY PROVIDED — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

01 ☐ C. PERMANENT WATER SUPPLY PROVIDED — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

01 ☐ D. SPILLED MATERIAL REMOVED — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

01 ☐ E. CONTAMINATED SOIL REMOVED — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

01 ☐ F. WASTE REPACKAGED — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

01 ☐ G. WASTE DISPOSED ELSEWHERE — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

01 ☐ H. ON SITE BURIAL — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

01 ☐ I. IN SITU CHEMICAL TREATMENT — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

01 ☐ J. IN SITU BIOLOGICAL TREATMENT — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

01 ☐ K. IN SITU PHYSICAL TREATMENT — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

01 ☐ L. ENCAPSULATION — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

01 ☐ M. EMERGENCY WASTE TREATMENT — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

01 ☐ N. CUTOFF WALLS — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

01 ☐ O. EMERGENCY DIKING/SURFACE WATER DIVERSION — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

01 ☐ P. CUTOFF TRENCHES/SUMP — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

01 ☐ Q. SUBSURFACE CUTOFF WALL — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

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POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 10 - PAST RESPONSE ACTIVITIES

I. IDENTIFICATION	
01 STATE	02 SITE NUMBER

II PAST RESPONSE ACTIVITIES (Continued)

01 ☐ R. BARRIER WALLS CONSTRUCTED — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

01 ☐ S. CAPPING/COVERING — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

01 ☐ T. BULK TANKAGE REPAIRED — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

01 ☐ U. GROUT CURTAIN CONSTRUCTED — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

01 ☐ V. BOTTOM SEALED — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

01 ☐ W. GAS CONTROL — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

01 ☐ X. FIRE CONTROL — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

01 ☐ Y. LEACHATE TREATMENT — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

01 ☐ Z. AREA EVACUATED — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

01 ☐ 1. ACCESS TO SITE RESTRICTED — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

01 ☐ 2. POPULATION RELOCATED — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

01 ☐ 3. OTHER REMEDIAL ACTIVITIES — 02 DATE _____ — 03 AGENCY _____
04 DESCRIPTION

III. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis, reports)

N/A

EPA

POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 11 - ENFORCEMENT INFORMATION

I. IDENTIFICATION	
01 STATE	02 SITE NUMBER

II. ENFORCEMENT INFORMATION

01 PAST REGULATORY/ENFORCEMENT ACTION ☑ YES ☐ NO

02 DESCRIPTION OF FEDERAL, STATE, LOCAL REGULATORY/ENFORCEMENT ACTION

Company failed to comply with Generator Standards 391-3-11-.08/40 CFR §262.34(a)(1) "Accumulation Time" because the facility did not have available for review a weekly inspection log and inspection schedule as required by 40 CFR § 265.174. The company was also cited with 39-3-11-.08/40 CFR §262.34(a)(4) "Accumulation Time" because the facility, since discontinuing its use of degreasing solvents, has not deleted degreasing solvent as a generated waste from its Contingency plan as required by 40 CFR, Subpart D, §265.54.

III. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis, reports)

Berns, B. 1984. Trip Report (EPA file material).

EPA FORM 2070-13 (7-81)

POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT

General Information

The Potential Hazardous Waste Site, Site Inspection Report form is used to record information collected during, or associated with, an inspection of the site and other information about responsible parties and past response activities.

The Site Inspection Report form contains eleven parts:

Part 1 – Site Location and Inspection Information

Part 2 – Waste Information

Part 3 – Description of Hazardous Conditions and Incidents

Part 4 – Permit and Descriptive Information

Part 5 – Water, Demographic, and Environmental Data

Part 6 – Sample and Field Information

Part 7 – Owner Information

Part 8 – Operator Information

Part 9 – Generator/Transporter Information

Part 10– Past Response Activities

Part 11– Enforcement Information

Part 1 – Site Location and Inspection Information contains all of the data elements also contained on the Site Identification and Preliminary Assessment forms required to add a site to the automated Site Tracking System (STS). It is therefore possible to add a site to STS at the Site Inspection stage. Instructions are given below.

Part 2 – Waste Information and Part 3 – Description of Hazardous Conditions and Incidents are used to record specific information about substances, amounts, hazards, and targets, e.g., population potentially affected. Parts 2 and 3 are also contained in the Potential Hazardous Waste Site, Preliminary Assessment form. Information recorded on Part 2 and Part 3 during a preliminary assessment may be updated, added, deleted, or corrected on the Site Inspection Report form.

An Appendix with feedstock names and CAS Numbers and the most frequently cited hazardous substances and CAS Numbers is located behind the instructions for the Site Inspection Report.

A number of the data items collected throughout the Site Inspection Report support the Site Ranking Model. The majority of these data items are found in Part 5 – Water, Demographic, and Environmental Data.

General Instructions

1. Complete the Site Inspection Report form as completely as possible.

2. Starred items (*) are required before inspection information can be added to STS. The system will not accept incomplete inspection information.

3. To add a site to STS at the Site Inspection stage, write "New" across the top of the form and complete items II-01, 02, 03, 04, and 06, Site Name and Location, II-09 Coordinates, and II-10, Type of Ownership.

4. Data items carried in STS, which are identical to those on the Site Identification and Preliminary Assessment forms and which can be added, deleted, or changed using the Site Inspection Report form, are indicated with a pound sign (#). To ensure that the proper action is taken, outline the item(s) to be added, deleted, or changed with a bright color and indicate the proper action with "A" (add), "D" (delete) or "C" (change).

5. There are two options available for adding, deleting, or changing information supplied on the Site Inspection Report form. The first is to use a new Site Inspection Report form, completing only those items to be added, deleted, or changed. Mark the form clearly, using "A", "D", or "C", to indicate the action to be taken. If only data in STS are to be altered, the Site Source Data Report may be used. Using the report, mark clearly the items to be changed and the action to be taken.

Detailed Instructions

Part 1 Site Location and Inspection Information

I. **Identification**: Identification (State and Site Number) is the site record key, or primary identifier, for the site. Site records in the STS are updated based on Identification. It is essential that State and Site Number are correctly entered on each form.

*I-01 State: Enter the two character alpha FIPS code for the state in which the site is located. It must be identical to State on the Site Identification form.

*I-02 Site Number: Enter the ten character alphanumeric code for sites which have a Dun and Bradstreet or EPA "user" Dun and Bradstreet number or the ten character numeric GSA identification code for federal sites. The Site Number must be identical to the Site Number on the Site Identification and Preliminary Assessment forms.

II. **Site Name and Location**: If Site Name and Location information require no additions or changes, these items are not required on the Site Inspection Report form. However, completing these items will facilitate use of the completed form and records management procedures.

#II-01 Site Name: Enter the legal, common, or descriptive name of the site.

#II-02 Site Street: Enter the street address and number (if appropriate) where the site is located. If the precise street address is unavailable for this site, enter brief direction identifier, e.g., NW Jct I-295 & US 99; Post Rd, 5 mi W of Rt. 5.

#II-03 Site City: Enter the city, town, village, or other municipality in which the site is located. If the site is not located in a municipality, enter the name of the municipality (or place) which is nearest the site or which most easily locates the site.

#II-04 Site State: Enter the two character alpha FIPS code for the state in which the site is located. The code must be the same as in item I-01.

#II-05 Site Zip Code: Enter the five character numeric zip code for the postal zone in which the site is located.

#II-06 Site County: Enter the name of the county, parish (Louisiana), or borough (Alaska) in which the site is located.

#II-07 County Code: Enter the three character numeric FIPS county code for the county, parish, or borough in which the site is located. (The regional data analyst can furnish this data item.)

#II-08 Site Congressional District: Enter the two character number for the congressional district in which the site is located.

*#II-09 Coordinates: Enter the Coordinates, Latitude and Longitude, of the site in degrees, minutes, seconds, and tenths of seconds. If a tenth of a second is insignificant at this site, enter "0" in the tenths position.

#II-10 Type of Ownership: Check the appropriate box to indicate the type of site ownership. If the site is under the jurisdiction of an activity of the federal government, enter the name of the department, agency, or activity. If Other is indicated, specify the type of ownership and name.

III. Inspection Information

*III-01 Date of Inspection: Enter the date the inspection occurred, or began for multiple day inspections.

*III-02 Site Status: Check the appropriate box(es) to indicate the current status of the site. Active sites are those which treat, store, or dispose of wastes. Check Active for those active sites with an inactive storage or disposal area. Inactive sites are those at which treatment, storage, or disposal activities no longer occur.

#III-03 Years of Operation: Enter the beginning and ending years (or beginning only if operations at the site are on-going), e.g., 1878/1932, of site operation. Check Unknown if years of operation are not known.

*III-04 Agency Performing Inspection: Check the appropriate box(es) to indicate parties participating in the inspection. If contractors participate, provide the name of the firm(s).

III-05 Chief Inspector: Enter the name of the chief, or lead inspector.

III-06 Title: Enter the Chief Inspector's title, e.g., Team Leader, FIT team.

III-07 Organization: Enter the name of the organization where the Chief Inspector is employed, e.g., EPA — Region 4, VA State Health Dept., Environmental Research Co.

III-08 Telephone Number: Enter the Chief Inspector's area code and local commercial telephone number.

III-09 Other Inspectors: Enter the names of other parties participating in the inspection.

III-10 Title: Enter the titles of other parties participating in the inspection.

III-11 Organization: Enter the names of the organizations where other parties participating in the inspection are employed.

III-12 Telephone Number: Enter the area code and local commercial telephone numbers of other parties participating in the inspection.

III-13 Site Representatives Interviewed: Enter the names of individuals representing responsible parties interviewed in connection with the inspection. Interviews do not necessarily occur during the inspection.

III-14 Title: Enter the titles of the individuals interviewed.

III-15 Address: Enter the business, mailing, or residential addresses of the individuals interviewed.

III-16 Telephone Number: Enter the area code and local commercial telephone numbers of the individuals interviewed.

III-17 Access Gained By: Check the appropriate box to indicate whether access to the site was gained through permission or warrant.

III-18 Time of Inspection: Using a 24-hour clock, enter the time the inspection began, e.g., for 3:24 p.m. enter 1524.

III-19 Weather Conditions: Describe the weather conditions during the site inspection, especially any unusual conditions which might affect results or observations taken.

IV. Information Available From

IV-01 Contact: Enter the name of the individual who can provide information about the site.

IV-02 Of: If appropriate, enter the name of the public or private agency, firm, or company and the organization within the agency, firm, or company of the individual named as Contact.

IV-03 Telephone Number: Enter the area code and local telephone number of the individual named as contact.

IV-04 Person Responsible for Site Inspection Report Form: Enter the name of the individual who was responsible for the information entered on the Site Inspection Report form. The person responsible for the Site Inspection Report form may be different from the individual who prepared the form.

IV-05 Agency: Enter the name of the Agency where the individual who is responsible for the Site Inspection Report form is employed.

IV-06 Organization: Enter the name of the organization within the Agency.

IV-07 Telephone Number: Enter the area code and local telephone number of the individual who is responsible for the Site Inspection Report form.

IV-08 Date: Enter the date the Site Inspection Report form was prepared.

Part 2 Waste Information

*I. **Identification**: Refer to Part 1—I.

II. **Waste States, Quantities, and Characteristics**: Waste States, Quantities, and Characteristics provide information about the physical structure and form of the waste, measures of gross amounts at the site, and the hazards posed by the waste, considering acute and chronic health effects and mobility along a pathway.

*II-01 Physical States: Check the appropriate box(es) to indicate the state(s) of waste present at the site. If Other is indicated, specify the physical state of the waste.

*II-02 Waste Quantity at Site: Enter estimates of amounts of waste at the site. Estimates may be in weight (Tons) or volume (Cubic Yards or Number of Drums). Use as many entries as are appropriate; however, measurements must be independent. For example, do not measure the same amounts of waste as both tons and cubic yards.

*II-03 Waste Characteristics: Check all appropriate entries to indicate the hazards posed by waste at the site. If waste at the site poses no hazard, check Not Applicable.

III. **Waste Category**: General categories of waste typically found are listed here. Enter the estimated gross amount of each category of waste and the appropriate unit of measure.

*III-01 Gross Amount: Gross Amount is the estimate of the amount of the waste category found at the site. Estimates should be furnished in metric tons (MT), tons (TN), cubic meters (CM), cubic yards (CY), drums (DR), acres (AC), acre feet (AF), liters (LT), or gallons (GA). Enter the estimated amount next to the appropriate waste category.

*III-02 Unit of Measure: Enter the appropriate unit of measure, MT (metric tons), TN (tons), CM (cubic meters), CY (cubic yards), DR (number of drums), AC (acres), AF (acre feet), LT (liters), or GA (gallons) next to the estimate of gross amount.

III-03 Comments: Comments may be used to further explain, or provide additional information, about particular waste categories.

IV. **Hazardous Substances**: Specific hazardous, or potentially hazardous, chemicals, mixtures, and substances found at the site are listed here. For each substance listed those data items marked with an "at" sign (@) must be included.

@IV-01 Category: Enter in front of the substance name the three character waste category from Section III which best describes the substance, e.g., OLW (Oily Waste).

@IV-02 Substance Name: Enter one of the following: the name of the substance registered with the Chemical Abstract Service, the common or accepted abbreviation of the substance, the generic name of the substance, or commercial name of the substance.

@IV-03 CAS Number: Enter the number assigned to the substance when it was registered with the Chemical Abstract Service. Refer to the Appendix for most frequently cited CAS Numbers. CAS Numbers must be furnished for each substance listed. If a CAS Number for this substance has not been assigned, enter "999".

@IV-04 Storage/Disposal Method: Enter the type of storage or disposal facility in which the substance was found: SI (surface impoundment, including pits, ponds, and lagoons), PL (pile), DR (drum), TK (tank), LF (landfill), LM (landfarm), OD (open dump).

IV-05 Concentration: Enter the concentration of the substance found in samples taken at the site.

IV-06 Measure of Concentration: Enter the appropriate unit of measure for the measured concentration of the substance found in the sample, e.g., MG/L, UG/L.

V. **Feedstocks**

V-01 Feedstock Name: If feedstocks, or substances derived from one or more feedstocks, are present at the site, enter the name of each feedstock found. See the Appendix for the feedstock list.

V-02 CAS Number: Enter the CAS Number for each feedstock named. See the Appendix for feedstock CAS Numbers.

VI. **Sources of Information**: List the sources used to obtain information for this form. Sources cited may include: sample analysis, reports, inspections, official records, or other documentation. Sources cited provide the basis for information entered on the form and may be used to obtain further information about the site.

Part 3 Description of Hazardous Conditions and Incidents

*I. **Identification**: Refer to Part 1—I.

II. **Hazardous Conditions and Incidents:**

II-01 Hazards: Indicate each hazardous, or potentially hazardous, condition known, or claimed, to exist at the site.

II-02 Observed, Potential, or Alleged: Check Observed and enter the date, or approximate date, of occurrence if a release of contaminants to the environment, or some other hazardous incident, is known to have occurred. In cases of a continuing release, e.g., groundwater contamination, enter the date, or approximate date, the condition first became apparent. If conditions exist for a potential release, check potential. Check Alleged for hazardous, or potentially hazardous, conditions claimed to exist at the site.

II-03 Population Potentially Affected: For each hazardous condition at the site, enter the number of people potentially affected. For Soil enter the number of acres potentially affected.

II-04 Narrative Description: Provide a narrative description, or explanation, of each condition. Include any additional information which further explains the condition.

II-06 Description of Any Other Known, Potential, or Alleged Hazards: Provide a narrative description of any other hazardous, or potentially hazardous, conditions at the site not covered above.

III. **Total Population Potentially Affected**: Enter the total number of people potentially affected by the existence of hazardous, or potentially hazardous, conditions at the site. Do not sum the numbers shown for each condition.

IV. **Comments**: Other information relevant to observed, potential, or alleged hazards may be entered here.

V. **Sources of Information**: List the sources used to obtain information for this form. Sources cited may include: sample analysis, reports, inspections, official records, or other documentation. Sources cited provide the basis for information entered on the form and may be used to obtain further information about the site.

Part 4 Permit and Descriptive Information

*I. **Identification**: Refer to Part 1–I.

II. **Permit Information**

II-01 Type of Permit Issued: Check the appropriate box(es) to indicate the types of permits issued to the site. If state, local, or other types of environmental permits have been issued, specify the type.

II-02 Permit Number: Enter the permit number for each issued permit.

II-03 Date Issued: Enter the date each permit was issued.

II-04 Expiration Date: Enter the date each permit expires or expired.

II-05 Comments: Enter any information which further explains the types of permits issued or status of the permits.

III. **Site Description**

*III-01 Storage/Disposal: Check the appropriate box(es) to indicate the types of storage/disposal facilities found at the site. If Other is checked, specify the type of facility.

*III-02 Amount: Enter the gross amount of waste associated with each type of storage/disposal facility. Amounts may be measured in: metric tons, tons, cubic meters, cubic yards, drums, acres, acre feet, liters, or gallons.

*III-03 Unit of Measure: Enter the appropriate unit of measure for each entry. Units of measure are MT (metric tons), TN (tons), CM (cubic meters), CY (cubic yards), DR (drums), AC (acres), AF (acre feet), LT (liters), or GA (gallons).

*III-04 Treatment: If waste is treated at the site, check the appropriated box(es) to indicate treatment methods used. If Other is checked, specify treatment method.

III-05 Other: If there are buildings on site, check this box.

*III-06 Area of Site: Enter total area of site in acres.

III-07 Comments: Enter any other pertinent information.

IV. **Containment**: Containment is a measure of the natural or artificial means taken to minimize or preclude health hazards and to minimize or prevent contamination of the environment from waste at the site.

*IV-01 Containment of Wastes: Check the appropriate box to indicate the condition of containment measures at the site. When choosing the appropriate box, consider the potential for environmental contamination, i.e., the worst case for containment in conjunction with the most hazardous substances.

IV-02 Description of Drums, Diking, Liners, Barriers: Provide a narrative description of the condition of containment measures at the site, e.g., waste adequately contained, drums rusting and leaking, diking collapsing, liners leaking and contaminants leaching into soil and groundwater.

V. **Accessibility**: Accessibility is an indicator of the potential for direct contact with hazardous substances.

*V-01 Waste Easily Accessible: If there are no real barriers preventing human access to hazardous waste, check Yes, otherwise check No.

V-02 Comments: Additional information about accessibility to hazardous waste may be provided.

VI. **Sources of Information**: List the sources used to obtain information for this form. Sources cited may include: sample analysis, reports, inspections, official records, or other documentation. Sources cited provide the basis for information entered on the form and may be used to obtain further information about the site.

Part 5 Water, Demographic, and Environmental Data

*I. **Identification**: Refer to Part 1–I.

II. **Drinking Water Supply**

II-01 Type of Drinking Water Supply: Check the appropriate box(es) to indicate the types and sources of drinking water within the vicinity of the site. Community refers to municipal sources. Non-community refers to private sources, e.g., private wells.

II-02 Status: Check the appropriate box(es) to indicate whether the water supply is endangered or affected by contaminants from the site. Check the appropriate box to indicate if the water supply is being monitored for possible contamination.

II-03 Distance to Site: Enter the distance in miles to the nearest tenth, hundredth, or thousandth (as needed to indicate the precision required) from the site to nearest drinking water source.

III. **Groundwater**

III-01 Groundwater Use in Vicinity: Check the appropriate box to indicate groundwater use in the vicinity of the site. The concern is to indicate the seriousness of groundwater contamination from waste at the site. Only Source for Drinking indicates that current water sources are limited to wells in the vicinity of the site. Drinking; Commercial, Industrial, Irrigation indicates that groundwater is used for drinking, but that other limited drinking sources are available and that no other sources for these additional uses are available. Commercial, Industrial, Irrigation indicates that groundwater is used for these purposes, but that limited other sources of water are available. Not used, Unuseable indicates that groundwater use in the area is not critical.

III-02 Population Served by Groundwater: Enter the number of people served by groundwater in the vicinity of the site. Population for the purposes of the Site Inspection Report includes residents and daytime workers and students but excludes transients in the neighborhood or on local highways and roads. When estimating population from aerial photographs or other sources, the conversion factor is 3.8 persons for each dwelling unit or 3 persons per acre in rural areas.

III-03 Distance to Nearest Drinking Water Well: Enter the distance in miles to the nearest tenth, hundredth, or thousandth (as needed to indicate the precision required) from the site to the nearest drinking water well.

III-04 Depth to Groundwater: Enter the depth in feet to groundwater.

III-05 Depth of Groundwater Flow: Enter the cardinal direction of groundwater flow, e.g., NNW.

III-06 Depth to Aquifer of Concern: Enter the depth in feet to the aquifer of concern.

III-07 Potential Yield of Aquifer: Enter the potential yield of the aquifer in gallons per day.

III-08 Sole Source Aquifer: Check the appropriate box to indicate the aquifer of concern is, or is not, a sole source aquifer.

III-09 Description of Wells: Provide a narrative description of wells in the vicinity of the site, including useage, depth, and location relative to population and buildings.

III-10 Recharge Area: Check the appropriate box to indicate the site is located in a recharge area. Comments provide additional information on the recharge area.

III-11 Discharge Area: Check the appropriate box to indicate the site is located in a discharge area. Comments provide additional information on the discharge area.

IV. Surface Water

IV-01 Surface Water Use: Check the appropriate box to indicate surface water use in the vicinity of the site. The order of precedence is Reservoir, Recreation, Drinking Water Source; Irrigation, Economically Important Reserves; Commercial/Industrial; Not Currently Used.

IV-02 Affected/Potentially Affected Bodies of Water: Enter the names of bodies of surface water affected, or potentially affected, by contaminants from the site. List the body of surface water nearest the site first. For each body of water check Affected if contaminants have been identified in samples of the water. Enter the shortest distance from the body of water to the site in miles to the nearest tenth, hundredth, or thousandth (as needed to indicate the precision required).

V. Demographic and Property Information

V-01 Total Population Within: Enter the total population within one (1) mile, two (2) miles, and three (3) miles of the site. Distances are measured from site boundaries. Population for the purposes of the Site Inspection Report includes residents and daytime workers and students but excludes transients in the neighborhood or on local highways and roads. When estimating population from aerial photographs or other sources, the conversion factor is 3.8 persons for each dwelling unit or 3 persons per acre in rural areas.

V-02 Distance to Nearest Population: Enter in miles to the nearest tenth, hundredth, or thousandth (as needed to indicate the precision required) the distance from the site boundary to the nearest population (one person minimum).

V-03 Number of Buildings Within Two (2) Miles of Site: Enter the number of buildings within two miles from the boundaries of the site.

V-04 Distance to Nearest Off-Site Building: Enter the distance in miles to the nearest tenth, hundredth, or thousandth (as needed to indicate the precision required) from the site boundary to the nearest off-site building.

V-05 Population in Vicinity of Site: Provide a narrative description of the nature of the population within the vicinity of the site. Examples include rural area, small truck farms, urban industrial area, densely populated urban residential area.

VI. Environmental Information

VI-01 Permeability of Unsaturated Zone: Check the appropriate box to indicate the permeability of the earth material above the water table in the vicinity of the site.

VI-02 Permeability of Bedrock: Check the appropriate box to indicate the permeability of the bedrock in the vicinity of the site.

VI-03 Depth to Bedrock: Enter the depth to bedrock in feet.

VI-04 Depth of Contaminated Soil Zone: Enter the depth of the contaminated soil zone in feet.

VI-05 Soil pH: Enter the pH of the soil in the vicinity of the site.

VI-06 Net Precipitation: Enter net precipitation in inches. If net precipitation is not known, subtract the average evaporation figure on the U.S. National Weather Service map showing average annual evaporation in inches from the U.S. Environmental Data Service map showing mean annual precipitation.

VI-07 One Year 24 Hour Rainfall: Enter in inches the figure for one year 24 hour rainfall.

VI-08 Slope: Enter the percentage of site slope, the direction of site slope, and the percentage of the surrounding terrain average slope.

VI-09 Flood Potential: Enter the boundary year for the floodplain in which the site is located. Sites flooded annually are in a 1 (one) year floodplain. Other examples include 10, 20, 50, 100, 500, etc., indicating the probability of flooding within that time period.

VI-10 Site is on Barrier Island, Coastal High Hazard Area, Riverine Floodway: If site is located in one of these areas, check this box.

VI-11 Distance to Wetlands: If applicable, enter the distance in miles to the nearest tenth, hundredth, or thousandth (as needed to indicate the precision required) from the site to the closest wetlands (five acre minimum) for Estuarine and Other types of wetlands.

VI-12 Distance to Critical Habitat: If applicable, enter the distance in miles to the nearest tenth, hundredth, or thousandth (as needed to indicate the precision required) from the site to the nearest critical habitat

of an endangered species. Enter the name(s) of the endangered species.

VI-13 Land Use in Vicinity: Enter the distance in miles to the nearest tenth, hundredth, or thousandth (as needed to indicate the precision required) to the nearest Commercial/Industrial area; Residential Area, National/State Parks, Forests, or Wildlife Reserves; or Agricultural Lands, Prime Ag Land and Ag Land. Prime Ag Land is that crop, pasture, range, or forest land which produces the highest yield in relation to inputs. Ag Land is the remaining agricultural land, frequently considered marginal.

VI-14 Description of Site in Relation to Surrounding Topography: Provide a narrative description of significant or unusual aspects of the surrounding topography in relation to the site. Examples might include: site is in a valley surrounded on all sides by mountains, site is at edge of a river or stream which floods frequently, etc.

VII. **Sources of Information**: List the sources used to obtain information for this form. Sources cited may include: sample analysis, reports, inspections, official records, or other documentation. Sources cited provide the basis for information entered on the form and may be used to obtain further information about the site.

Part 6 Sample and Field Information

*I. **Identification**: Refer to Part 1–I.

II. **Samples Taken**

II-01 Number of Samples Taken: Next to each sample type enter the number of samples of that type taken.

II-02 Samples Sent To: Enter the name of the laboratory or other facility where the samples were sent for analysis.

II-03 Estimated Date Results Available: Enter the estimated date the results are expected to be available.

III. **Field Measurements Taken**

III-01 Type: Enter the type, e.g., radioactivity, explosivity, organic vapor or gas detection and analysis, reagent type gas detection, of each field measurement taken.

III-02 Comments: Describe results of field measurements, whether they were taken on or off site, and if applicable, the type of disposal facility tested, e.g., drum, surface impoundment, landfill.

IV. **Photographs and Maps**

IV-01 Type: If photographs of the site have been taken, check the appropriate box(es) to indicate the type.

IV-02 In Custody Of: Enter the name of the organization or person who has custody of the photographs.

IV-03 Maps: Check the appropriate box to indicate that maps of the site area have been prepared or obtained.

IV-04 Location of Maps: If site maps are available, indicate their location, e.g., Region 1 Air and Hazardous Materials Division.

V. **Other Field Data Collected**: Provide a narrative description of any other field data collected.

VI. **Sources of Information**: List the sources used to obtain information for this form. Sources cited may include: sample analysis, reports, inspections, official records, or other documentation. Sources cited provide the basis for information entered on the form and may be used to obtain further information about the site.

Part 7 Owner Information

*I. **Identification**: Refer to Part 1–I.

II. **Current Owner(s) – Parent Company**: Current owner(s) and parent companies, for those owners which are companies partly or wholly owned by another company, provide locator information about responsible parties. Each Part 7 provides space for four (4) current owners and their respective parent companies. If additional space is required, complete another Part 7.

II-01 Name: Enter the legal name of the owner of the site. The owner may be a firm, government agency, association, individual, etc.

II-02 D&B Number: Where available, enter the owner's D&B (Dun and Bradstreet) number. If the current owner is a federal agency, enter the GSA identification code.

II-03 Street Address: Enter the business, mailing, or residential street address of the owner.

II-04 SIC Code: If applicable, enter the owner's primary SIC Code.

II-05 City: Enter the city of the owner's business, mailing, or residential address.

II-06 State: Enter the two character alpha FIPS code for the state of the owner's business, mailing, or residential address.

II-07 Zip Code: Enter the five digit zip code for the owner's business, mailing, or residential address.

II-08 Name: If the owner is a partly or wholly owned subsidiary of another company, enter the legal name of the owner's parent company.

II-09 D&B Number: Enter the parent company's Dun and Bradstreet number.

II-10 Street Address: Enter the business or mailing street address of the parent company.

II-11 SIC Code: If applicable, enter the parent company's primary SIC code.

II-12 City: Enter the city of the parent company's business or mailing address.

II-13 State: Enter the two character alpha FIPS code for the state of the parent company's business or mailing address.

II-14 Zip Code: Enter the five digit zip code for the parent company's business or mailing address.

III. **Previous Owner(s)**: List previous owners in reverse chronological order, i.e., most recent first. If additional space is required, complete another Part 7.

III-01 Name: Enter the legal name of the previous owner. The previous owner may have been a firm, government agency, association, individual, etc.

III-02 D&B Number: Enter the previous owner's Dun and Bradstreet number if available. If the previous owner was a federal agency, enter the GSA identification code if available.

III-03 Street Address: Enter the business, mailing, or residential street address of the previous owner.

III-04 SIC Code: If applicable, enter the primary SIC Code of the previous owner.

III-05 City: Enter the city of the previous owner's business, mailing, or residential address.

III-06 State: Enter the two character alpha FIPS code for the state of the previous owner's business, mailing, or residential address.

III-07 Zip Code: Enter the zip code of the previous owner's business, mailing, or residential address.

IV. **Realty Owner(s)**: Realty owner applies when the owner leased to another entity property which was used for the storage or disposal of hazardous waste. List current or most recent first.

IV-01 Name: Enter the legal name of the realty owner. The realty owner may be a firm, government agency, association, individual, etc.

IV-02 D&B Number: Enter the previous owner's Dun and Bradstreet number if available. If the previous owner was a federal agency, enter the GSA identification code if available.

IV-03 Street Address: Enter the realty owner's business, mailing, or residential street address.

IV-04 SIC Code: If applicable, enter the realty owner's primary SIC Code.

IV-05 City: Enter the city of the realty owner's business, mailing, or residential address.

IV-06 State: Enter the two character alpha FIPS code for the state of the realty owner's business, mailing, or residential address.

IV-07 Zip Code: Enter the zip code of the realty owner's business, mailing, or residential address.

V. **Sources of Information**: List the sources used to obtain information for this form. Sources cited may include: sample analysis, reports, inspections, official records, or other documentation. Sources cited provide the basis for information entered on the form and may be used to obtain further information about the site.

Part 8 Operator Information

*I. **Identification**: Refer to Part 1–I.

II. **Current Operator–Operator's Parent Company**: Information on operators is applicable when the operator is not the owner.

II-01 Name: Enter the legal name of the operator. The operator may be a firm, government agency, association, individual, etc.

II-02 D&B Number: Enter the operator's Dun and Bradstreet number if available. If the operator is a federal agency, enter the GSA identification code if available.

II-03 Street Address: Enter the operator's business, mailing, or residential street address.

II-04 SIC Code: If applicable, enter the operator's primary SIC Code.

II-05 City: Enter the city of the operator's business, mailing, or residential address.

II-06 State: Enter the two character alpha FIPS code for the state of the operator's business, mailing, or residential address.

II-07 Zip Code: Enter the zip code of the operator's business, mailing, or residential address.

II-08 Years of Operation: Enter the beginning and ending years (or beginning only if operations are on-going), e.g., 1932/1948, of operation at the site.

II-09 Name of Owner: Enter the name of the owner for the period cited for this operator.

II-10 Name: If applicable, enter the legal name of the operator's parent company.

II-11 D&B Number: Enter the operator's parent company Dun and Bradstreet number if available.

II-12 Street Address: Enter the operator's parent company business, mailing, or residential street address.

II-13 SIC Code: If applicable, enter the operator's parent company primary SIC Code.

II-14 City: Enter the city of the operator's parent company business, mailing, or residential address.

II-15 State: Enter the two character alpha FIPS code for the state of the operator's parent company business, mailing, or residential address.

II-16 Zip Code: Enter the zip code of the operator's parent company business, mailing, or residential address.

III. **Previous Operator(s)–Previous Operators' Parent Companies**

III-01 Name: Enter the legal name of the previous operator. The previous operator may be a firm, government agency, association, individual, etc.

III-02 D&B Number: Enter the previous operator's Dun and Bradstreet number if available. If the previous operator was a federal agency, enter the GSA identification code if available.

III-03 Street Address: Enter the previous operator's business, mailing, or residential street address.

III-04 SIC Code: If applicable, enter the previous operator's primary SIC Code.

III-05 City: Enter the city of the previous operator's business, mailing, or residential address.

III-06 State: Enter the two character alpha FIPS code for the state of the previous operator's business, mailing, or residential address.

III-07 Zip Code: Enter the zip code of the previous operator's business, mailing, or residential address.

III-08 Years of Operation: Enter the beginning and ending years of operation for this operator at the site.

III-09 Name of Owner: Enter the name of the owner for the period cited for this operator.

III-10 Name: If applicable, enter the legal name of the previous operator's parent company.

III-11 D&B Number: Enter the previous operator's parent company Dun and Bradstreet number if available.

III-12 Street Address: Enter the previous operator's parent company business, mailing, or residential street address.

III-13 SIC Code: If applicable, enter the previous operator's parent company primary SIC Code.

III-14 City: Enter the city of the previous operator's parent company business, mailing, or residential address.

III-15 State: Enter the two character alpha FIPS code for the state of the previous operator's parent company business, mailing, or residential address.

III-16 Zip Code: Enter the zip code of the previous operator's parent company business, mailing, or residential address.

IV. **Sources of Information**: List the sources used to obtain information for this form. Sources cited may include: sample analysis, reports, inspections, official records, or other documentation. Sources cited provide the basis for information entered on the form and may be used to obtain further information about the site.

Part 9 Generator/Transporter Information

*I. **Identification**: Refer to Part 1–I.

II. **On-Site Generator**: A company or agency, located within the contiguous area of the site and generating waste disposed on the site, is entered here.

II-01 Name: If there is an on-site generator, enter the legal name of the on-site generator. The on-site generator may be a firm or government agency.

II-02 D&B Number: Where available, enter the on-site generator's D&B (Dun and Bradstreet) number. If the on-site generator is a federal agency, enter the GSA identification code.

II-03 Street Address: Enter the business or mailing street address of the on-site generator.

II-04 SIC Code: If applicable, enter the on-site generator's primary SIC Code.

II-05 City: Enter the city of the on-site generator's business or mailing address.

II-06 State: Enter the two character alpha FIPS code for the state of the on-site generator's business or mailing address.

II-07 Zip Code: Enter the five digit zip code for the on-site generator's business or mailing address.

III. **Off-Site Generator(s)**: Those companies or agencies off-site who have generated waste which has been disposed at the site are listed here.

III-01 Name: Enter the legal name of the off-site generator. The off-site generator may be a firm or government agency.

III-02 D&B Number: Where available, enter the off-site generator's D&B (Dun and Bradstreet) number. If the off-site generator is a federal agency, enter the GSA identification code.

III-03 Street Address: Enter the business or mailing street address of the off-site generator.

III-04 SIC Code: If applicable, enter the off-site generator's primary SIC Code.

III-05 City: Enter the city of the off-site generator's business or mailing address.

III-06 State: Enter the two character alpha FIPS code for the state of the off-site generator's business or mailing address.

III-07 Zip Code: Enter the five digit zip code for the off-site generator's business or mailing address.

IV. **Transporter(s)**: Those carriers who are known to have transported waste to the site are listed here.

IV-01 Name: Enter the legal name of the transporter. The transporter may be a firm, government agency, association, individual, etc.

IV-02 D&B Number: Where available, enter the transporter's D&B (Dun and Bradstreet) number. If the transporter is a federal agency, enter the GSA identification code.

IV-03 Street Address: Enter the business, mailing, or residential street address of the transporter.

IV-04 SIC Code: If applicable, enter the transporter's primary SIC Code.

IV-05 City: Enter the city of the transporter's business, mailing, or residential address.

IV-06 State: Enter the two character alpha FIPS code for the state of the transporter's business, mailing, or residential address.

IV-07 Zip Code: Enter the five digit zip code for the transporter's business, mailing, or residential address.

V. **Sources of Information**: List the sources used to obtain information for this form. Sources cited may include: sample analysis, reports, inspections, official records, or other documentation. Sources cited provide the basis for information entered on the form and may be used to obtain further information about the site.

Part 10 Past Response Activities

*I. **Identification**: Refer to Part 1–I.

II. **Past Response Activities**

II-01 Past Response Activities: Check the appropriate box(es) to indicate response activities initiated prior to the passage of CERCLA, December, 1980.

II-02 Date: Enter the start date (or approximate date) of the activity.

II-03 Agency: Enter the name of the Agency responsible for the activity.

II-04 Description: Provide a brief narrative description of the activity.

III. **Sources of Information**: List the sources used to obtain information for this form. Sources cited may include: sample analysis, reports, inspections, official records, or other documentation. Sources cited provide the basis for information entered on the form and may be used to obtain further information about the site.

Part 11 Enforcement Information

*I. **Identification**: Refer to Part 1–I.

II. **Enforcement Information**

II-01 Past Regulatory/Enforcement Action: Check the appropriate box to indicate past regulatory or enforcement action at the federal, state, or local level related to this site.

II-02 Description of Federal, State, Local Regulatory or Enforcement Action: Provide a narrative description of regulatory or enforcement action to date. Do not include any enforcement action contemplated in the process of development.

III. **Sources of Information**: List the sources used to obtain information for this form. Sources cited may include: sample analysis, reports, inspections, official records, or other documentation. Sources cited provide the basis for information entered on the form and may be used to obtain further information about the site.

APPENDIX

I. FEEDSTOCKS

CAS Number	Chemical Name
1. 7664-41-7	Ammonia
2. 7440-36-0	Antimony
3. 1309-64-4	Antimony Trioxide
4. 7440-38-2	Arsenic
5. 1327-53-3	Arsenic Trioxide
6. 21109-95-5	Barium Sulfide
7. 7726-95-6	Bromine
8. 106-99-0	Butadiene
9. 7440-43-9	Cadmium
10. 7782-50-5	Chlorine
11. 12737-27-8	Chromite
12. 7440-47-3	Chromium
13. 7440-48-4	Cobalt
14. 1317-38-0	Cupric Oxide
15. 7758-98-7	Cupric Sulfate
16. 1317-39-1	Cuprous Oxide
17. 74-85-1	Ethylene
18. 7647-01-0	Hydrochloric Acid
19. 7664-39-3	Hydrogen Fluoride
20. 1335-25-7	Lead Oxide
21. 7439-97-6	Mercury
22. 74-82-8	Methane
23. 91-20-3	Napthalene
24. 7440-02-0	Nickel
25. 7697-37-2	Nitric Acid
26. 7723-14-0	Phosphorus
27. 7778-50-9	Potassium Dichromate
28. 1310-58-3	Potassium Hydroxide
29. 115-07-1	Propylene
30. 10588-01-9	Sodium Dichromate
31. 1310-73-2	Sodium Hydroxide
32. 7646-78-8	Stannic Chloride
33. 7772-99-8	Stannous Chloride
34. 7664-93-9	Sulfuric Acid
35. 108-88-3	Toluene
36. 1330-20-7	Xylene
37. 7646-85-7	Zinc Chloride
38. 7733-02-0	Zinc Sulfate

II. HAZARDOUS SUBSTANCES

CAS Number	Chemical Name
1. 75-07-0	Acetaldehyde
2. 64-19-7	Acetic Acid
3. 108-24-7	Acetic Anhydride
4. 75-86-5	Acetone Cyanohydrin
5. 506-96-7	Acetyl Bromide
6. 75-36-5	Acetyl Chloride
7. 107-02-8	Acrolein
8. 107-13-1	Acrylonitrile
9. 124-04-9	Adipic Acid
10. 309-00-2	Aldrin
11. 10043-01-3	Aluminum Sulfate
12. 107-18-6	Allyl Alcohol
13. 107-05-1	Allyl Chloride
14. 7664-41-7	Ammonia
15. 631-61-8	Ammonium Acetate
16. 1863-63-4	Ammonium Benzoate
17. 1066-33-7	Ammonium Bicarbonate
18. 7789-09-5	Ammonium Bichromate
19. 1341-49-7	Ammonium Bifluoride
20. 10192-30-0	Ammonium Bisulfite
21. 1111-78-0	Ammonium Carbamate
22. 12125-02-9	Ammonium Chloride
23. 7788-98-9	Ammonium Chromate
24. 3012-65-5	Ammonium Citrate, Dibasic
25. 13826-83-0	Ammonium Fluoborate
26. 12125-01-8	Ammonium Fluoride
27. 1336-21-6	Ammonium Hydroxide
28. 6009-70-7	Ammonium Oxalate
29. 16919-19-0	Ammonium Silicofluoride
30. 7773-06-0	Ammonium Sulfamate
31. 12135-76-1	Ammonium Sulfide
32. 10196-04-0	Ammonium Sulfite
33. 14307-43-8	Ammonium Tartrate
34. 1762-95-4	Ammonium Thiocyanate
35. 7783-18-8	Ammonium Thiosulfate
36. 628-63-7	Amyl Acetate
37. 62-53-3	Aniline
38. 7647-18-9	Antimony Pentachloride
39. 7789-61-9	Antimony Tribromide
40. 10025-91-9	Antimony Trichloride
41. 7783-56-4	Antimony Trifluoride
42. 1309-64-4	Antimony Trioxide
43. 1303-32-8	Arsenic Disulfide
44. 1303-28-2	Arsenic Pentoxide
45. 7784-34-1	Arsenic Trichloride
46. 1327-53-3	Arsenic Trioxide
47. 1303-33-9	Arsenic Trisulfide
48. 542-62-1	Barium Cyanide
49. 71-43-2	Benzene
50. 65-85-0	Benzoic Acid
51. 100-47-0	Benzonitrile
52. 98-88-4	Benzoyl Chloride
53. 100-44-7	Benzyl Chloride
54. 7440-41-7	Beryllium
55. 7787-47-5	Beryllium Chloride
56. 7787-49-7	Beryllium Fluoride
57. 13597-99-4	Beryllium Nitrate
58. 123-86-4	Butyl Acetate
59. 84-74-2	n-Butyl Phthalate
60. 109-73-9	Butylamine
61. 107-92-6	Butyric Acid
62. 543-90-8	Cadmium Acetate
63. 7789-42-6	Cadmium Bromide
64. 10108-64-2	Cadmium Chloride
65. 7778-44-1	Calcium Arsenate
66. 52740-16-6	Calcium Arsenite
67. 75-20-7	Calcium Carbide
68. 13765-19-0	Calcium Chromate
69. 592-01-8	Calcium Cyanide
70. 26264-06-2	Calcium Dodecylbenzene Sulfonate
71. 7778-54-3	Calcium Hypochlorite
72. 133-06-2	Captan
73. 63-25-2	Carbaryl
74. 1563-66-2	Carbofuran
75. 75-15-0	Carbon Disulfide
76. 56-23-5	Carbon Tetrachloride
77. 57-74-9	Chlordane
78. 7782-50-5	Chlorine
79. 108-90-7	Chlorobenzene
80. 67-66-3	Chloroform
81. 7790-94-5	Chlorosulfonic Acid
82. 2921-88-2	Chlorpyrifos
83. 1066-30-4	Chromic Acetate
84. 7738-94-5	Chromic Acid
85. 10101-53-8	Chromic Sulfate
86. 10049-05-5	Chromous Chloride
87. 544-18-3	Cobaltous Formate
88. 14017-41-5	Cobaltous Sulfamate
89. 56-72-4	Coumaphos
90. 1319-77-3	Cresol
91. 4170-30-3	Crotonaldehyde
92. 142-71-2	Cupric Acetate
93. 12002-03-8	Cupric Acetoarsenite
94. 7447-39-4	Cupric Chloride
95. 3251-23-8	Cupric Nitrate
96. 5893-66-3	Cupric Oxalate
97. 7758-98-7	Cupric Sulfate
98. 10380-29-7	Cupric Sulfate Ammoniated
99. 815-82-7	Cupric Tartrate
100. 506-77-4	Cyanogen Chloride
101. 110-82-7	Cyclohexane
102. 94-75-7	2,4-D Acid
103. 94-11-1	2,4-D Esters
104. 50-29-3	DDT
105. 333-41-5	Diazinon
106. 1918-00-9	Dicamba
107. 1194-65-6	Dichlobenil
108. 117-80-6	Dichlone
109. 25321-22-6	Dichlorobenzene (all isomers)
110. 26638-19-7	Dichloropropane (all isomers)
111. 26952-23-8	Dichloropropene (all isomers)
112. 8003-19-8	Dichloropropene-Dichloropropane Mixture
113. 75-99-0	2-2-Dichloropropionic Acid
114. 62-73-7	Dichlorvos
115. 60-57-1	Dieldrin
116. 109-89-7	Diethylamine
117. 124-40-3	Dimethylamine
118. 25154-54-5	Dinitrobenzene (all isomers)
119. 51-28-5	Dinitrophenol
120. 25321-14-6	Dinitrotoluene (all isomers)
121. 85-00-7	Diquat
122. 298-04-4	Disulfoton
123. 330-54-1	Diuron
124. 27176-87-0	Dodecylbenzenesulfonic Acid
125. 115-29-7	Endosulfan (all isomers)
126. 72-20-8	Endrin and Metabolites
127. 106-89-8	Epichlorohydrin
128. 563-12-2	Ethion
129. 100-41-4	Ethyl Benzene
130. 107-15-3	Ethylenediamine
131. 106-93-4	Ethylene Dibromide
132. 107-06-2	Ethylene Dichloride
133. 60-00-4	EDTA
134. 1185-57-5	Ferric Ammonium Citrate
135. 2944-67-4	Ferric Ammonium Oxalate
136. 7705-08-0	Ferric Chloride

II. HAZARDOUS SUBSTANCES

CAS Number	Chemical Name
137. 7783-50-8	Ferric Fluoride
138. 10421-48-4	Ferric Nitrate
139. 10028-22-5	Ferric Sulfate
140. 10045-89-3	Ferrous Ammonium Sulfate
141. 7758-94-3	Ferrous Chloride
142. 7720-78-7	Ferrous Sulfate
143. 206-44-0	Fluoranthene
144. 50-00-0	Formaldehyde
145. 64-18-6	Formic Acid
146. 110-17-8	Fumaric Acid
147. 98-01-1	Furfural
148. 86-50-0	Guthion
149. 76-44-8	Heptachlor
150. 118-74-1	Hexachlorobenzene
151. 87-68-3	Hexachlorobutadiene
152. 67-72-1	Hexachloroethane
153. 70-30-4	Hexachlorophene
154. 77-47-4	Hexachlorocyclopentadiene
155. 7647-01-0	Hydrochloric Acid (Hydrogen Chloride)
156. 7664-39-3	Hydrofluoric Acid (Hydrogen Fluoride)
157. 74-90-8	Hydrogen Cyanide
158. 7783-06-4	Hydrogen Sulfide
159. 78-79-5	Isoprene
160. 42504-46-1	Isopropanolamine Dodecylbenzenesulfonate
161. 115-32-2	Kelthane
162. 143-50-0	Kepone
163. 301-04-2	Lead Acetate
164. 3687-31-8	Lead Arsenate
165. 7758-95-4	Lead Chloride
166. 13814-96-5	Lead Fluoborate
167. 7783-46-2	Lead Fluoride
168. 10101-63-0	Lead Iodide
169. 18256-98-9	Lead Nitrate
170. 7428-48-0	Lead Stearate
171. 15739-80-7	Lead Sulfate
172. 1314-87-0	Lead Sulfide
173. 592-87-0	Lead Thiocyanate
174. 58-89-9	Lindane
175. 14307-35-8	Lithium Chromate
176. 121-75-5	Malthion
177. 110-16-7	Maleic Acid
178. 108-31-6	Maleic Anhydride
179. 2032-65-7	Mercaptodimethur
180. 592-04-1	Mercuric Cyanide
181. 10045-94-0	Mercuric Nitrate
182. 7783-35-9	Mercuric Sulfate
183. 592-85-8	Mercuric Thiocyanate
184. 10415-75-5	Mercurous Nitrate
185. 72-43-5	Methoxychlor
186. 74-93-1	Methyl Mercaptan
187. 80-62-6	Methyl Methacrylate
188. 298-00-0	Methyl Parathion
189. 7786-34-7	Mevinphos
190. 315-18-4	Mexacarbate
191. 75-04-7	Monoethylamine
192. 74-89-5	Monomethylamine
193. 300-76-5	Naled
194. 91-20-3	Naphthalene
195. 1338-24-5	Naphthenic Acid
196. 7440-02-0	Nickel
197. 15699-18-0	Nickel Ammonium Sulfate
198. 37211-05-5	Nickel Chloride
199. 12054-48-7	Nickel Hydroxide
200. 14216-75-2	Nickel Nitrate
201. 7786-81-4	Nickel Sulfate
202. 7697-37-2	Nitric Acid
203. 98-95-3	Nitrobenzene
204. 10102-44-0	Nitrogen Dioxide
205. 25154-55-6	Nitrophenol (all isomers)
206. 1321-12-6	Nitrotoluene
207. 30525-89-4	Paraformaldehyde
208. 56-38-2	Parathion
209. 608-93-5	Pentachlorobenzene
210. 87-86-5	Pentachlorophenol
211. 85-01-8	Phenanthrene
212. 108-95-2	Phenol
213. 75-44-5	Phosgene
214. 7664-38-2	Phosphoric Acid
215. 7723-14-0	Phosphorus
216. 10025-87-3	Phosphorus Oxychloride
217. 1314-80-3	Phosphorus Pentasulfide
218. 7719-12-2	Phosphorus Trichloride
219. 7784-41-0	Potassium Arsenate
220. 10124-50-2	Potassium Arsenite
221. 7778-50-9	Potassium Bichromate
222. 7789-00-6	Potassium Chromate
223. 7722-64-7	Potassium Permanganate
224. 2312-35-8	Propargite
225. 79-09-4	Propionic Acid
226. 123-62-6	Propionic Anhydride
227. 1336-36-3	Polychlorinated Biphenyls
228. 151-50-8	Potassium Cyanide
229. 1310-58-3	Potassium Hydroxide
230. 75-56-9	Propylene Oxide
231. 121-29-9	Pyrethrins
232. 91-22-5	Quinoline
233. 108-46-3	Resorcinol
234. 7446-08-4	Selenium Oxide
235. 7761-88-8	Silver Nitrate
236. 7631-89-2	Sodium Arsenate
237. 7784-46-5	Sodium Arsenite
238. 10588-01-9	Sodium Bichromate
239. 1333-83-1	Sodium Bifluoride
240. 7631-90-5	Sodium Bisulfite
241. 7775-11-3	Sodium Chromate
242. 143-33-9	Sodium Cyanide
243. 25155-30-0	Sodium Dodecylbenzene Sulfonate
244. 7681-49-4	Sodium Fluoride
245. 16721-80-5	Sodium Hydrosulfide
246. 1310-73-2	Sodium Hydroxide
247. 7681-52-9	Sodium Hypochlorite
248. 124-41-4	Sodium Methylate
249. 7632-00-0	Sodium Nitrate
250. 7558-79-4	Sodium Phosphate, Dibasic
251. 7601-54-9	Sodium Phosphate, Tribasic
252. 10102-18-8	Sodium Selenite
253. 7789-06-2	Strontium Chromate
254. 57-24-9	Strychnine and Salts
255. 100-420-5	Styrene
256. 12771-08-3	Sulfur Monochloride
257. 7664-93-9	Sulfuric Acid
258. 93-76-5	2,4,5-T Acid
259. 2008-46-0	2,4,5-T Amines
260. 93-79-8	2,4,5-T Esters
261. 13560-99-1	2,4,5-T Salts
262. 93-72-1	2,4,5-TP Acid
263. 32534-95-5	2,4,5-TP Acid Esters
264. 72-54-8	TDE
265. 95-94-3	Tetrachlorobenzene
266. 127-18-4	Tetrachloroethane
267. 78-00-2	Tetraethyl Lead
268. 107-49-3	Tetraethyl Pyrophosphate
269. 7446-18-6	Thallium (I) Sulfate
270. 108-88-3	Toluene
271. 8001-35-2	Toxaphene
272. 12002-48-1	Trichlorobenzene (all isomers)
273. 52-68-6	Trichlorfon
274. 25323-89-1	Trichloroethane (all isomers)
275. 79-01-6	Trichloroethylene
276. 25167-82-2	Trichlorophenol (all isomers)
277. 27323-41-7	Triethanolamine Dodecylbenzenesulfonate
278. 121-44-8	Triethylamine
279. 75-50-3	Trimethylamine
280. 541-09-3	Uranyl Acetate
281. 10102-06-4	Uranyl Nitrate
282. 1314-62-1	Vanadium Pentoxide
283. 27774-13-6	Vanadyl Sulfate
284. 108-05-4	Vinyl Acetate
285. 75-35-4	Vinylidene Chloride
286. 1300-71-6	Xylenol
287. 557-34-6	Zinc Acetate
288. 52628-25-8	Zinc Ammonium Chloride
289. 1332-07-6	Zinc Borate
290. 7699-45-8	Zinc Bromide
291. 3486-35-9	Zinc Carbonate
292. 7646-85-7	Zinc Chloride
293. 557-21-1	Zinc Cyanide
294. 7783-49-3	Zinc Fluoride
295. 557-41-5	Zinc Formate
296. 7779-86-4	Zinc Hydrosulfite
297. 7779-88-6	Zinc Nitrate
298. 127-82-2	Zinc Phenolsulfonate
299. 1314-84-7	Zinc Phosphide
300. 16871-71-9	Zinc Silicofluoride
301. 7733-02-0	Zinc Sulfate
302. 13746-89-9	Zirconium Nitrate
303. 16923-95-8	Zirconium Potassium Fluoride
304. 14644-61-2	Zirconium Sulfate
305. 10026-11-6	Zirconium Tetrachloride

1) Audits Jan - Feb (12-15)

2) Question changes (new form)

3) Pri. Res. When in doubt, [illegible] it!

ETA (X2) complete packages

File - Facility Red R

Department of Natural Resources
ENVIRONMENTAL PROTECTION DIVISION
270 WASHINGTON STREET, S W
ATLANTA, GEORGIA 30334

JOE D. TANNER
Commissioner

J. LEONARD LEDBETTER
Division Director

COPY

TRIP REPORT
August 30, 1984

Site Name and Location: Vermont American Corporation, Toccoa Division, Toccoa, Georgia

Trip By: Betty Burns BB

Accompanied By: None

Date of Trip: August 9, 1984

Official Contacted: Mr. Tommy Carlton, Project Engineer

Reference: Facility File - letter dated August 7, 1984

Comments:

1. Vermont American manufactures circular saw blades.
2. The processing operations inspected include grinding, cutting, shaping, ink stamping, and chrome plating. The processing operations that generate hazardous waste involve the ink stamping and chrome plating. The ink stamping process generates an ink and lacquer thinner classified by the facility as EPA hazardous waste D001. The D001 waste, one fifty-five gallon drum every three months, is shipped to Caldwell Systems, Lenora, North Carolina quarterly for incineration. The chrome plating operation consisting of three identical plating lines to include tanks of alkaline wash solution tanks, spray water rinse tanks, acid pickle rinse solution tanks, electroclean (electrolyte alkaline solution), counter flow rinse water dip tanks, drip tanks, chrome plating tanks, cold water rinse counter flow dip tanks, and hot water rinse dip tanks. The alkaline wash solutions, electroclean solutions and acid solutions from the chrome plating lines when no longer useable, are dipped out of the process tanks, and placed in 55-gallon drums for use in the facility's wastewater pretreatment system for pH adjustment. The chrome plating tanks, when too contaminated or no longer useable, are drummed up (once per year 14 55-gallon drums, classified as D002 and D007), and disposed of by SCA Services of Pinewood, South Carolina. The rinse tanks in the plating line continuously overflow in a manner wherein the skimmings on the top of these tanks are collected in a flow drain underneath the plating line. The rinsewater skimming from the drain, flow to the automated wastewater pretreatment system in which it receives pH adjustment, chrome reduction from stage +6 to +3, clarification/flocculation and dewatering. The dewatering system is a filter press that generates a chrome hydroxide sludge which the facility has classified as F006. The F006 waste, approximately 25 drums per months, is shipped every ninety days to SCA Services of Pinewood, South Carolina for disposal.

REFERENCES

Conclusions:

1. Based on inspection information, the company generates in excess of 2,200 pounds of hazardous waste, and is therefore, confirmed to be a hazardous waste generator.

2. The company has not complied with the Generator Standards noted below:
   391-3-11-.08/40 CFR §262.34(a)(1) "Accumulation Time", because the facility did not have available for review a weekly inspection log and inspection schedule as required by 40 CFR §265.174.

   391-3-11-.08/40 CFR §262.34(a)(4) "Accumulation Time", because the facility, since discontinuing its use of degreasing solvents, has not deleted degreasing solvent as a generated waste from its Contingency Plan as required by 40 CFR, Subpart D, §265.54.

Recommendations and Follow-Up Required:
Send Vermont American a Notice of Violation for the violations cited above in Conclusion #2.

Photographs: None

Reviewed By: SEH 9/12/84

Attachments: Contingency Plan
Generator Checklist

BB:rw:059
cc: Betty Burns
File - Vermont American Corporation - Toccoa - (R)

JOE D. TANNER
Commissioner

J. LEONARD LEDBETTER
Division Director

Department of Natural Resources

ENVIRONMENTAL PROTECTION DIVISION
270 WASHINGTON STREET S W
ATLANTA, GEORGIA 30334

January 14, 1983

Ms. Julia P. Hagan
Hamilton, Roach, & Diamond
Vermont American Building
100 East Liberty Street
Louisville, KY 40202

RE: Request for Facility Status Changes for Vermont American Corp., Toccoa, GAD084362656

Dear Ms. Hagan:

This will acknowledge receipt of your request for withdrawal of your application for a Hazardous Waste Facility permit.

Based on the information provided, withdrawal of your application is warranted and your permit application has been placed in our inactive files.

Please be advised that withdrawal of your permit application invalidates any variance that you received to continue existing hazardous waste treatment storage or disposal during the permit review process and that based on our concurrence with your withdrawal request, the Federal Environmental Protection Agency will terminate your facility's interim status.

Should you wish to treat, store, or dispose of hazardous waste in the future, it will be necessary that a hazardous waste handling permit be issued, prior to the construction of such facilities, under authority of Section 8 of the Georgia Hazardous Waste Management Act and paragraphs .10 and .11 of Georgia's Rules for Hazardous Waste Management, Chapter 391-3-11.

If further clarification is needed on this matter, please feel free to contact Ms. Betty Burns at 404/656-2833.

Sincerely,

John D. Taylor, Jr.
Program Manager
Industrial & Hazardous Waste
Management Program

JDT:bbk:2037C
cc: James H. Scarbrough
Moses N. McCall, III
File: Vermont American (Y)

EPA

TENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 1 - SITE INFORMATION AND ASSESSMENT

I. IDENTIFICATION
01 STATE: GA | 02 SITE NUMBER: GAD084382656

II. SITE NAME AND LOCATION

01 SITE NAME (Legal, common, or descriptive name of site)	02 STREET, ROUTE NO., OR SPECIFIC LOCATION IDENTIFIER				
VERMONT AMERICAN CORP. -TOCCOA DIV.	P. O. BOX 787, Meadowbrook, Indust. Pk.				
03 CITY	04 STATE	05 ZIP CODE	06 COUNTY	07 COUNTY CODE	08 CONG DIST
Toccoa	GA	30577	Stephens	257	09

09 COORDINATES: LATITUDE 34° 34' 42.0" | LONGITUDE 083° 19' 18.0"

10 DIRECTIONS TO SITE (Starting from nearest public road)
The facility is located west of the intersection of GA Hwy 17 and Meadow Brook Dr.

III. RESPONSIBLE PARTIES

01 OWNER (If known)	02 STREET (Business, mailing, residential)			
Vermont American Corp. Toccoa Division	P. O. Box 787			
03 CITY	04 STATE	05 ZIP CODE	06 TELEPHONE NUMBER	
Toccoa	GA	30577	(404) 779-3391	
07 OPERATOR (If known and different from owner)	08 STREET (Business, mailing, residential)			
Same as Above				
09 CITY	10 STATE	11 ZIP CODE	12 TELEPHONE NUMBER	
			( )	

13 TYPE OF OWNERSHIP (Check one)
☒ A. PRIVATE ☐ B. FEDERAL: _____ (Agency name) ☐ C. STATE ☐ D. COUNTY ☐ E. MUNICIPAL
☐ F. OTHER: _____ (Specify) ☐ G. UNKNOWN

14 OWNER/OPERATOR NOTIFICATION ON FILE (Check all that apply)
☒ A. RCRA 3001 DATE RECEIVED: 11/19/80 (MONTH DAY YEAR) ☐ B. UNCONTROLLED WASTE SITE (CERCLA 103 c) DATE RECEIVED: / / (MONTH DAY YEAR) ☐ C. NONE

IV. CHARACTERIZATION OF POTENTIAL HAZARD

01 ON SITE INSPECTION
☒ YES DATE 3/1/78 (MONTH DAY YEAR) 2-22-79
☐ NO

BY (Check all that apply)
☐ A. EPA ☐ B. EPA CONTRACTOR ☒ C. STATE ☐ D. OTHER CONTRACTOR
☐ E. LOCAL HEALTH OFFICIAL ☐ F. OTHER: _____ (Specify)
CONTRACTOR NAME(S): _____

02 SITE STATUS (Check one)
☒ A. ACTIVE ☐ B. INACTIVE ☐ C. UNKNOWN

03 YEARS OF OPERATION
1977 (BEGINNING YEAR) | present (ENDING YEAR) ☐ UNKNOWN

04 DESCRIPTION OF SUBSTANCES POSSIBLY PRESENT, KNOWN, OR ALLEGED
Spent electroplating solutions and wastes, sludge (tank bottoms). Trichloroethylene/ oil wastes, lacquer thinner, steel/chrome plating wastes (heavy metals).

05 DESCRIPTION OF POTENTIAL HAZARD TO ENVIRONMENT AND/OR POPULATION
all wastes are handled in accordance with the Georgia Rules for Hazardous Waste Management.

V. PRIORITY ASSESSMENT

01 PRIORITY FOR INSPECTION (Check one. If high or medium is checked, complete Part 2 - Waste Information and Part 3 - Description of Hazardous Conditions and Incidents)
☐ A. HIGH (Inspection required promptly) ☐ B. MEDIUM (Inspection required) ☐ C. LOW (Inspect on time available basis) ☒ D. NONE (No further action needed, complete current disposition form)

VI. INFORMATION AVAILABLE FROM

01 CONTACT	02 OF (Agency/Organization)		03 TELEPHONE NUMBER	
Tommy Carlton	Vermont American Corp		(404) 779-3391	
04 PERSON RESPONSIBLE FOR ASSESSMENT	05 AGENCY	06 ORGANIZATION	07 TELEPHONE NUMBER	08 DATE
Gilda A. Knowles	DNR - EPD	REMEDIAL ACTION	(404) 656-7404	12 12 85 (MONTH DAY YEAR)

EPA FORM 2070-12 (7-81)

Mike Allred

EPA

POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 2 - WASTE INFORMATION

I. IDENTIFICATION

01 STATE	02 SITE NUMBER
GA	D084362656

II. WASTE STATES, QUANTITIES, AND CHARACTERISTICS

01 PHYSICAL STATES (Check all that apply)

- [X] A. SOLID
- [ ] B. POWDER, FINES
- [X] C. SLUDGE
- [ ] D. OTHER (Specify)
- [ ] E. SLURRY
- [X] F. LIQUID
- [ ] G. GAS

02 WASTE QUANTITY AT SITE (Measures of waste quantities must be independent)

TONS: _____
CUBIC YARDS: unknown
NO. OF DRUMS: _____

03 WASTE CHARACTERISTICS (Check all that apply)

- [X] A. TOXIC
- [X] B. CORROSIVE
- [ ] C. RADIOACTIVE
- [ ] D. PERSISTENT
- [ ] E. SOLUBLE
- [ ] F. INFECTIOUS
- [X] G. FLAMMABLE
- [ ] H. IGNITABLE
- [ ] I. HIGHLY VOLATILE
- [ ] J. EXPLOSIVE
- [ ] K. REACTIVE
- [ ] L. INCOMPATIBLE
- [ ] M. NOT APPLICABLE

III. WASTE TYPE

CATEGORY	SUBSTANCE NAME	01 GROSS AMOUNT	02 UNIT OF MEASURE	03 COMMENTS
SLU	SLUDGE	2640	lbs.	volume weight/month
OLW	OILY WASTE	55	gal	one generated/month
SOL	SOLVENTS			
PSD	PESTICIDES			
OCC	OTHER ORGANIC CHEMICALS			
IOC	INORGANIC CHEMICALS			
ACD	ACIDS			
BAS	BASES			
MES	HEAVY METALS			

IV. HAZARDOUS SUBSTANCES (See Appendix for most frequently cited CAS Numbers)

01 CATEGORY	02 SUBSTANCE NAME	03 CAS NUMBER	04 STORAGE/DISPOSAL METHOD	05 CONCENTRATION	06 MEASURE OF CONCENTRATION
SLU	chromium/sludge	7440-4703	drums/ SCA Chem.	unknown	-
	spent solutions		services		
OLW	trichloroethylene	79-01-6	recycled	unknown	-

V. FEEDSTOCKS (See Appendix for CAS Numbers)

CATEGORY	01 FEEDSTOCK NAME	02 CAS NUMBER	CATEGORY	01 FEEDSTOCK NAME	02 CAS NUMBER
FDS			FDS		
FDS			FDS		
FDS			FDS		
FDS			FDS		

VI. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sampling results, reports)

GA EPD STATE FILES
VERMONT AMERICAN CORP. - TOCCOA DIVISION; TOCCOA, GEORGIA

EPA

POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION	
01 STATE	02 SITE NUMBER
GA	0084363656

II. HAZARDOUS CONDITIONS AND INCIDENTS

01 ☐ A. GROUNDWATER CONTAMINATION — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ B. SURFACE WATER CONTAMINATION — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ C. CONTAMINATION OF AIR — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ D. FIRE/EXPLOSIVE CONDITIONS — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ E. DIRECT CONTACT — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ F. CONTAMINATION OF SOIL — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 AREA POTENTIALLY AFFECTED: _____ (Acres) 04 NARRATIVE DESCRIPTION

01 ☐ G. DRINKING WATER CONTAMINATION — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ H. WORKER EXPOSURE/INJURY — 02 ☐ OBSERVED (DATE _____) ☐ POTENTIAL ☐ ALLEGED
03 WORKERS POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ I. POPULATION EXPOSURE/INJURY — 02 ☐ OBSERVED (DATE _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

EPA

POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION	
01 STATE	02 SITE NUMBER
GA	D084362656

II. HAZARDOUS CONDITIONS AND INCIDENTS (Continued)

01 ☐ J. DAMAGE TO FLORA — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION

01 ☐ K. DAMAGE TO FAUNA — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION (Include name(s) of species)

01 ☐ L. CONTAMINATION OF FOOD CHAIN — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION

01 ☐ M. UNSTABLE CONTAINMENT OF WASTES (Spills/runoff/standing liquids/leaking drums) — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ N. DAMAGE TO OFFSITE PROPERTY — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION

01 ☐ O. CONTAMINATION OF SEWERS, STORM DRAINS, WWTPs — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION

01 ☐ P. ILLEGAL/UNAUTHORIZED DUMPING — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION

05 DESCRIPTION OF ANY OTHER KNOWN, POTENTIAL, OR ALLEGED HAZARDS

III. TOTAL POPULATION POTENTIALLY AFFECTED: 1mil=327; 2mils=1,417; 3mils=3,070.

IV. COMMENTS

The population distribution was calculated from topographical maps in accordance with HRS ranking system.

V. SOURCES OF INFORMATION (Cite specific references, e.g. state files, sample analysis, reports)

GA EPD STATE FILES
VERMONT AMERICAN CORP. - TOCCOA DIVISION, - TOCCOA, GA.

OVERSIZED

DOCUMENT

M.2 - SITE MAINTENANCE FORM

EPA ID : GAD084362656

SITE NAME: VERMONT AMERICAN CORP TOCCOA DIV SOURCE: H

STREET : MEADOWBROOK IND PK CONG DIST: 09

CITY : TOCCOA ZIP: 30577

CNTY NAME: STEPHENS CNTY CODE : 257

LATITUDE : 34/34/42.0 LONGITUDE : 083/19/18.0

LL-SOURCE: R LL-ACCURACY:

SMSA : HYDRO UNIT: 00000000

INVENTORY IND: Y REMEDIAL IND: Y REMOVAL IND: N FED FAC IND: N

NPL IND: N NPL LISTING DATE: NPL DELISTING DATE:

SITE/SPILL IDS:

RPM NAME: RPM PHONE: - -

SITE CLASSIFICATION: SITE APPROACH:

DIOXIN TIER: REG FLD1: REG FLD2: 6

RESP TERM: PENDING ( ) NO FURTHER ACTION ( )

ENF DISP: NO VIABLE RESP PARTY ( ) VOLUNTARY RESPONSE ( )
ENFORCED RESPONSE ( ) COST RECOVERY ( )

SITE DESCRIPTION:

* ACTION: _

* _____ _

* _____ __

* _____ _____-____

* _____ ___

* __/__/__._

* _ _

* ____ _____

* _ _ _ _

* _ __/__ __/__

* __ __ __ __ __

* _____ ___-___-____

* __ ___

* ____ _____ _

* PENDING (_) NO FURTHER ACTION (_)

* _ _
* _ _

* _____

* _____

* _____

* _____

M.2 - PROGRAM MAINTENANCE FORM

* ACTION: _ *

SITE: VERMONT AMERICAN CORP TOCCOA DIV

EPA ID: GAD084362656 PROGRAM CODE: H01 PROGRAM TYPE: * _ *

PROGRAM QUALIFIER: ALIAS LINK : * ___ __ *

PROGRAM NAME: SITE EVALUATION * _____ *

DESCRIPTION:

* _____ *

* _____ *

* _____ *

* _____ *

M.2 - EVENT MAINTENANCE FORM

* ACTION: _ *

SITE: VERMONT AMERICAN CORP TOCCOA DIV
PROGRAM: SITE EVALUATION

EPA ID: GAD084362656 PROGRAM CODE: H01 EVENT TYPE: DSI

FMS CODE: EVENT QUALIFIER : EVENT LEAD: E * _ ___ _ *

EVENT NAME: DISCOVERY STATUS: * _____ _ *

DESCRIPTION:

* _____ *
* _____ *
* _____ *
* _____ *

ORIGINAL	CURRENT	ACTUAL			
START:	START:	START:	* __/__/__	__/__/__	__/__/__ *
COMP :	COMP :	COMP : 11/01/80	* __/__/__	__/__/__	__/__/__ *

HQ COMMENT:

* _____ *

RG COMMENT:

* _____ *

COOP AGR #	AMENDMENT #	STATUS	STATE %				
			0	* _____	_____	__	___ *

M.2 - EVENT MAINTENANCE FORM

* ACTION: _ *

SITE: VERMONT AMERICAN CORP TOCCOA DIV
PROGRAM: SITE EVALUATION

EPA ID: GAD084362656 PROGRAM CODE: H01 EVENT TYPE: PA1

FMS CODE: EVENT QUALIFIER : EVENT LEAD: S * _ ___ _ *

EVENT NAME: PRELIMINARY ASSESSMENT STATUS: * _____ _ *

DESCRIPTION:

* _____ *
* _____ *
* _____ *
* _____ *

ORIGINAL	CURRENT	ACTUAL			
START:	START:	START:	* __/__/__	__/__/__	__/__/__ *
COMP :	COMP :	COMP : 09/29/86	* __/__/__	__/__/__	__/__/__ *

HQ COMMENT:

* _____ *

RG COMMENT:

* _____ *

COOP AGR #	AMENDMENT #	STATUS	STATE %				
			0	* _____	_____	__	___ *

M.2 - COMMENT MAINTENANCE FORM

SITE: VERMONT AMERICAN CORP TOCCOA DIV

EPA ID: GAD084362656

COM NO	COMMENT	ACTION	
001	PART A- ON FILE	_	
002	THIS SITE IS INSPECTED ANNUALLY	_	
003	BY THE STATE R.C.R.A. PROGRAM	_	
004	AS A GENERATOR OF HAZARDOUS WASTE.	_	

M.2 - REGIONAL UTILITY MAINTENANCE FORM

SITE: VERMONT AMERICAN CORP TOCCOA DIV

EPA ID: GAD084362656

REG CODE: OSIP-01 * ACTION: _ *

DESCRIPTION: METAL PLATING * _____ *

* _____ *

DATE1: * __/__/__ *

DATE2: * __/__/__ *

DATE3: * __/__/__ *

FREE FIELD: * _____ *

REG CODE: 4HFA-01 * ACTION: _ *

DESCRIPTION: NO FURTHER ACTION * _____ *

* _____ *

DATE1: * __/__/__ *

DATE2: * __/__/__ *

DATE3: * __/__/__ *

FREE FIELD: * _____ *

POOR LEGIBILITY

PORTIONS OF THIS DOCUMENT MAY BE UNREADABLE, DUE TO THE QUALITY OF THE ORIGINAL

PRELIMINARY ASSESSMENT COVER SHEET
VERMONT AMERICAN CORP.-TOCCOA DIVISION
GAD084362656

I. HISTORY OF SITE

The Vermont American Corporation-Toccoa Divison is located in Meadowbrook Industrial Park (P. O. Box 787) in Toccoa, Georgia 30577. It has been operated and owned by Vermont American Corporation, since 1977. The facility manufactures circular saw blades and electroplates chromium on steel. Prior to 1980 chromium contaminated sludge from the facility's wastewater treatment plant was transported off-site for disposal by SCA Chemical Services in Pinewood, South Carolina. Currently, the processing operations include grinding, cutting, shaping, ink stamping and chrome plating. Wastes generated from operations at the facility are as follows: swarf waste from blade grinding is recycled back into the system; scrap metal from the blanking press is handled by Greenville Scrap Metal Company in Greenville, South Carolina; lubricating oil recovered from floor areas is sold to SCA Services in South Carolina; ink lacquer contaminated wastes from the ink stamping process is sent to Harwell Systems in Lenore, North Carolina and chrome plating wastes are disposed of by SCA Services in Pinewood, South Carolina. The Part A Application for this facility has been withdrawn and the facility is currently classified as a generator of hazardous wastes.

II. NATURE OF HAZARDOUS MATERIALS

The hazardous materials generated at this facility are slugde from wastewater treatment electroplating, sludge from tank bottoms, spent electroplating solutions, waste oil contaminated with trichloroethylene and lacquer thinner contaminated with ink. Wastes are contained in fifty-five gallon drums and shipped off-site for disposal. The total quantity of wastes from 1978-1983 is estimated at 120 tons.

III. DESCRIPTION OF HAZARDOUS CONDITIONS, INCIDENTS, PERMIT VIOLATIONS

According to Mr. Tommy Carleton, Project Engineer for Vermont American Corporation-Toccoa Division, there have been no on-site spills; all wastes are stored in a secured area. The facility has been cited several times in the past by the Georgia EPD for being in violation of generator standards.

IV. ROUTES FOR CONTAMINATION

None

V. POSSIBLE AFFECTED POPULATION AND RESOURCES

The population within a one mile radius of the site is 327, within two miles is 1,417 and within three miles is 3,070.

VI. RECOMMENDATIONS AND JUSTIFICATIONS

The site is assessed a "None" priority for a Site Inspection because it has been inspected by personnel of the Georgia EPD and no evidence of on-site spills or disposal of hazardous wastes has been found.

VII. REFERENCE TO SUPPORTING DATA SOURCES

1. EPA Form 3510-1, 3510-3 (6/80), 11/19/80.
2. Memo, 9/28/76, RE: Wastewater Discharge.
3. Letter, 8/24/77, RE: Laboratory Analysis of Sludge.
4. Facility Information Report, 3/1/78.
5. Letter, 9/26/78, RE: Disposal of Waste Water Treatment Sludge.
6. Georgia EPD, Action Reports, 2/22/79, 1/29/81.
7. Letter, 11/23/79, RE: Disposal of Chrome Hydroxide Sludge at SCA Chemical Services.
8. Electroplating Point Source Category Reporting Form, 11/19/80.
9. Georgia EPD, Trip Reports, 12/8/82, 8/9/84.
10. Letter, 1/14/83, RE: Acknowledgement of Withdrawal of Part A Application from Georgia EPD.
11. Generator Annual Hazardous Waste Reports, 1981, 1982 & 1983.
12. Memo, 7/26/83, RE: Delisting of Wastes.
13. Waste Management Data Sheet, 2/3/84.
14. Letter, 8/7/84, RE: Delisting Petition.
15. Generator Standards Inspection Checklist, 8/9/84.
16. Letter, 9/7/84, RE: Notice of Violation.
17. Letter, 11/2/84, RE: Response to Notice of Violation.
18. Hazardous Waste Contingency Plan for Vermont American Corporation, 11/2/84.
19. Lett[illegible] 11/19/84, RE: Compliance Status-Generator Requirements.
20. Telephone Conversation Record, 12/12/85.

GAK/mcw038

POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 1 - SITE INFORMATION AND ASSESSMENT

EPA

I. IDENTIFICATION
01 STATE: GA | 02 SITE NUMBER: 0084362656

II. SITE NAME AND LOCATION

01 SITE NAME (Legal, common, or descriptive name of site)	02 STREET, ROUTE NO., OR SPECIFIC LOCATION IDENTIFIER				
VERMONT AMERICAN CORP. -TOCCOA DIV.	P. O. BOX 787, Meadowbrook, Indust. Pk.				
03 CITY: Toccoa	04 STATE: GA	05 ZIP CODE: 30577	06 COUNTY: Stephens	07 COUNTY CODE: 257	08 CONG DIST: 09
09 COORDINATES LATITUDE: 34° 34' 42.0"	LONGITUDE: 083° 19' 18.0"				

10 DIRECTIONS TO SITE (Starting from nearest public road)
The facility is located west of the intersection of GA Hwy 17 and Meadow Brook Dr.

III. RESPONSIBLE PARTIES

01 OWNER (If known)	02 STREET (Business, mailing, residential)			
Vermont American Corp. Toccoa Division	P. O. Box 787			
03 CITY: Toccoa	04 STATE: GA	05 ZIP CODE: 30577	06 TELEPHONE NUMBER: (404) 779-3391	
07 OPERATOR (If known and different from owner): Same as Above	08 STREET (Business, mailing, residential)			
09 CITY	10 STATE	11 ZIP CODE	12 TELEPHONE NUMBER: ( )	

13 TYPE OF OWNERSHIP (Check one)
☒ A. PRIVATE ☐ B. FEDERAL: _____ (Agency name) ☐ C. STATE ☐ D. COUNTY ☐ E. MUNICIPAL
☐ F. OTHER: _____ (Specify) ☐ G. UNKNOWN

14 OWNER/OPERATOR NOTIFICATION ON FILE (Check all that apply)
☒ A. RCRA 3001 DATE RECEIVED: 11/19/80 (MONTH DAY YEAR) ☐ B. UNCONTROLLED WASTE SITE (CERCLA 103 c) DATE RECEIVED: / / (MONTH DAY YEAR) ☐ C. NONE

IV. CHARACTERIZATION OF POTENTIAL HAZARD

01 ON SITE INSPECTION
☒ YES ☐ NO
DATE 3/1/78 (MONTH DAY YEAR)
2-22-79

BY (Check all that apply)
☐ A. EPA ☐ B. EPA CONTRACTOR ☒ C. STATE ☐ D. OTHER CONTRACTOR
☐ E. LOCAL HEALTH OFFICIAL ☐ F. OTHER: _____ (Specify)
CONTRACTOR NAME(S): _____

02 SITE STATUS (Check one)
☒ A. ACTIVE ☐ B. INACTIVE ☐ C. UNKNOWN

03 YEARS OF OPERATION
1977 (BEGINNING YEAR) | present (ENDING YEAR) ☐ UNKNOWN

04 DESCRIPTION OF SUBSTANCES POSSIBLY PRESENT, KNOWN, OR ALLEGED
Spent electroplating solutions and wastes, sludge (tank bottoms). Trichloroethylene/ oil wastes, lacquer thinner, steel/chrome plating wastes (heavy metals).

05 DESCRIPTION OF POTENTIAL HAZARD TO ENVIRONMENT AND/OR POPULATION
all wastes are handled in accordance with the Georgia Rules for Hazardous Waste Management.

V. PRIORITY ASSESSMENT

01 PRIORITY FOR INSPECTION (Check one. If high or medium is checked, complete Part 2 - Waste Information and Part 3 - Description of Hazardous Conditions and Incidents)
☐ A. HIGH (Inspection required promptly) ☐ B. MEDIUM (Inspection required) ☐ C. LOW (Inspect on time available basis) ☒ D. NONE (No further action needed, complete current disposition form)

VI. INFORMATION AVAILABLE FROM

01 CONTACT	02 OF (Agency/Organization)		03 TELEPHONE NUMBER
Tommy Carlton	Vermont American Corp		(404) 779-3391
04 PERSON RESPONSIBLE FOR ASSESSMENT	05 AGENCY	06 ORGANIZATION	07 TELEPHONE NUMBER	08 DATE
Gilda A. Knowles	DNR - EPD	REMEDIAL ACTION	(404) 656-7404	12 12 85 (MONTH DAY YEAR)

EPA FORM 2070-12 (7-81)

Mike Allred

EPA

POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 2 - WASTE INFORMATION

I. IDENTIFICATION

01 STATE	02 SITE NUMBER
GA	D084362656

II. WASTE STATES, QUANTITIES, AND CHARACTERISTICS

01 PHYSICAL STATES (Check all that apply)

- [X] A. SOLID
- [ ] B. POWDER, FINES
- [X] C. SLUDGE
- [ ] D. OTHER (Specify)
- [ ] E. SLURRY
- [X] F. LIQUID
- [ ] G. GAS

02 WASTE QUANTITY AT SITE (Measures of waste quantities must be independent)

TONS: _____
CUBIC YARDS: unknown
NO. OF DRUMS: _____

03 WASTE CHARACTERISTICS (Check all that apply)

- [X] A. TOXIC
- [X] B. CORROSIVE
- [ ] C. RADIOACTIVE
- [ ] D. PERSISTENT
- [ ] E. SOLUBLE
- [ ] F. INFECTIOUS
- [X] G. FLAMMABLE
- [ ] H. IGNITABLE
- [ ] I. HIGHLY VOLATILE
- [ ] J. EXPLOSIVE
- [ ] K. REACTIVE
- [ ] L. INCOMPATIBLE
- [ ] M. NOT APPLICABLE

III. WASTE TYPE

CATEGORY	SUBSTANCE NAME	01 GROSS AMOUNT	02 UNIT OF MEASURE	03 COMMENTS
SLU	SLUDGE	2640	lbs.	volume weight/month
OLW	OILY WASTE	55	gal	one generated/month
SOL	SOLVENTS			
PSD	PESTICIDES			
OCC	OTHER ORGANIC CHEMICALS			
IOC	INORGANIC CHEMICALS			
ACD	ACIDS			
BAS	BASES			
MES	HEAVY METALS			

IV. HAZARDOUS SUBSTANCES (See Appendix for most frequently cited CAS Numbers)

01 CATEGORY	02 SUBSTANCE NAME	03 CAS NUMBER	04 STORAGE/DISPOSAL METHOD	05 CONCENTRATION	06 MEASURE OF CONCENTRATION
SLU	chromium/sludge	7440-4703	drums/ SCA Chem.	unknown	-
	spent solutions		services		
OLW	trichloroethylene	79-01-6	recycled	unknown	-

V. FEEDSTOCKS (See Appendix for CAS Numbers)

CATEGORY	01 FEEDSTOCK NAME	02 CAS NUMBER	CATEGORY	01 FEEDSTOCK NAME	02 CAS NUMBER
FDS			FDS		
FDS			FDS		
FDS			FDS		
FDS			FDS		

VI. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis, reports.)

GA EPD STATE FILES
VERMONT AMERICAN CORP. - TOCCOA DIVISION; TOCCOA, GEORGIA

EPA

POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION	
01 STATE	02 SITE NUMBER
GA	D084363656

II. HAZARDOUS CONDITIONS AND INCIDENTS

01 ☐ A. GROUNDWATER CONTAMINATION — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ B. SURFACE WATER CONTAMINATION — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ C. CONTAMINATION OF AIR — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ D. FIRE/EXPLOSIVE CONDITIONS — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ E. DIRECT CONTACT — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ F. CONTAMINATION OF SOIL — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 AREA POTENTIALLY AFFECTED: _____ (Acres) 04 NARRATIVE DESCRIPTION

01 ☐ G. DRINKING WATER CONTAMINATION — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ H. WORKER EXPOSURE/INJURY — 02 ☐ OBSERVED (DATE _____) ☐ POTENTIAL ☐ ALLEGED
03 WORKERS POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ I. POPULATION EXPOSURE/INJURY — 02 ☐ OBSERVED (DATE _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED _____ 04 NARRATIVE DESCRIPTION

EPA

POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE	02 SITE NUMBER
GA	D084362656

II. HAZARDOUS CONDITIONS AND INCIDENTS *(Continued)*

01 ☐ J. DAMAGE TO FLORA — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION

01 ☐ K. DAMAGE TO FAUNA — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION *(Include name(s) of species)*

01 ☐ L. CONTAMINATION OF FOOD CHAIN — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION

01 ☐ M. UNSTABLE CONTAINMENT OF WASTES *(Spills/runoff/standing liquids/leaking drums)* — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ N. DAMAGE TO OFFSITE PROPERTY — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION

01 ☐ O. CONTAMINATION OF SEWERS, STORM DRAINS, WWTPs — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION

01 ☐ P. ILLEGAL/UNAUTHORIZED DUMPING — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION

05 DESCRIPTION OF ANY OTHER KNOWN, POTENTIAL, OR ALLEGED HAZARDS

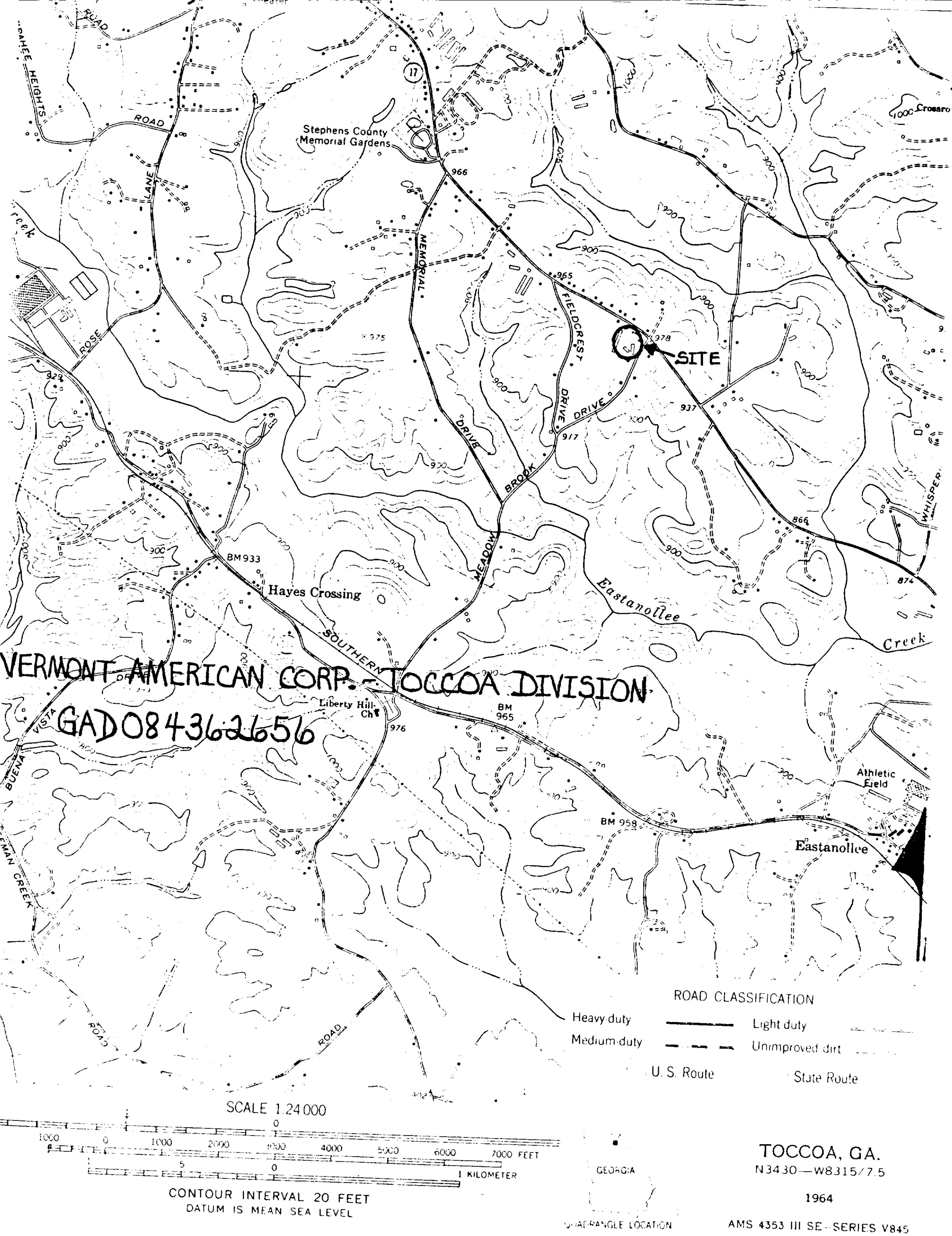
III. TOTAL POPULATION POTENTIALLY AFFECTED: 1mil=327; 2mils=1,417; 3mils=3,070

IV. COMMENTS

The population distribution was calculated from topographical maps in accordance with HRS ranking system.

V. SOURCES OF INFORMATION *(Cite specific references, e.g., state files, sample analysis, reports)*

GA EPD STATE FILES
VERMONT AMERICAN CORP. - TOCCOA DIVISION, - TOCCOA, GA.


VERMONT AMERICAN CORP. - TOCCOA DIVISION
GAD084362656
SITE
Stephens County Memorial Gardens
Hayes Crossing
Liberty Hill Ch
Eastanollee
Eastanollee Creek
Athletic Field
MEMORIAL DRIVE
FIELDCREST DRIVE
BROOK DRIVE
MEADOW
SOUTHERN
ROSE
LANE
ROAD
BUENA VISTA
BM 933
BM 965
BM 958
ROAD CLASSIFICATION
Heavy-duty
Light duty
Medium-duty
Unimproved dirt
U. S. Route
State Route
SCALE 1:24 000
1 KILOMETER
7000 FEET
CONTOUR INTERVAL 20 FEET
DATUM IS MEAN SEA LEVEL
GEORGIA
QUADRANGLE LOCATION
TOCCOA, GA.
N3430—W8315/7.5
1964
AMS 4353 III SE—SERIES V845

VERMONT AMERICAN CORPORATION

Post Office Box 1475
Louisville, Kentucky 40201
Telephone 502 587-6851

November 19, 1980

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Permit Contact
Permits Section
U. S. Environmental Protection Agency
345 Courtland Street, N.E.
Atlanta, Georgia 30365

Dear Sir:

Enclosed are Form 1 General Information and Form 3 RCRA Hazardous Waste Permit Application for Vermont American Corporation, Toccoa Division. The facility has not yet received an EPA identification number.

The corporation, which engages in pretreatment of its wastes prior to disposal, was of the impression until recently that the regulation under the Resources Conservation and Recovery Act referring to treatment facilities applied only to facilities such as recyclers whose sole business was treatment.

When the corporation became aware on November 17, 1980, that its pretreatment was also covered by the May 19, 1980, regulations, it immediately began accumulating the data required for Forms 1 and 3.

Because the plant sites are so scattered, it has been unable to assemble the topographical maps and photographs required in Part XI on Form 1 and Part VI on Form 3, respectively. The corporation was also unable to complete the facility drawing or determine the geographic location as required in Parts V and VII of Form 3. This information will be forwarded immediately upon its acquisition and completion.

Very truly yours,

W. E. COWLEY

FORM 1 GENERAL

EPA

U.S. ENVIRONMENTAL PROTECTION AGENCY

GENERAL INFORMATION

Consolidated Permits Program

(Read the "General Instructions" before starting.)

I. EPA I.D. NUMBER

F GAD084362656

GENERAL INSTRUCTIONS

If a preprinted label has been provided, affi it in the designated space. Review the inform ation carefully; if any of it is incorrect, cro through it and enter the correct data in th appropriate fill-in area below. Also, if any c the preprinted data is absent *(the area to th left of the label space lists the informatio that should appear)*, please provide it in th proper fill-in area(s) below. If the label complete and correct, you need not comple Items I, III, V, and VI *(except VI-B whic must be completed regardless)*. Complete a items if no label has been provided. Refer t the instructions for detailed item descri tions and for the legal authorizations unde which this data is collected.

LABEL ITEMS

I. EPA I.D. NUMBER

III. FACILITY NAME

V. FACILITY MAILING ADDRESS

VI. FACILITY LOCATION

Vermont American Corporation
Toccoa Division
Meadowbrook Industrial Park
P. O. Box 787
Toccoa, Georgia 30577

II. POLLUTANT CHARACTERISTICS

INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold-faced terms.

SPECIFIC QUESTIONS	MARK "X" YES	NO	FORM ATTACHED	SPECIFIC QUESTIONS	MARK "X" YES	NO	FORM ATTACHED
A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)		X		B. Does or will this facility *(either existing or proposed)* include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)		X	
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)		X		D. Is this a proposed facility *(other than those described in A or B above)* which will result in a discharge to waters of the U.S.? (FORM 2D)		X	
E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)	X		X	F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)		X	
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		X		H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)		X	
I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X		J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X	

III. NAME OF FACILITY

1 SKIP Vermont American Corp Toccoa Division

IV. FACILITY CONTACT

A. NAME & TITLE *(last, first, & title)*	B. PHONE *(area code & no.)*
2 Sage Robson General Manager	404 779 3391

V. FACILITY MAILING ADDRESS

A. STREET OR P.O. BOX			
3 P. O. Box 787			
B. CITY OR TOWN	**C. STATE**	**D. ZIP CODE**	
4 Toccoa	GA	30577	

VI. FACILITY LOCATION

A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER			
5 Meadowbrook Industrial Park			
B. COUNTY NAME			
Stephens			
C. CITY OR TOWN	**D. STATE**	**E. ZIP CODE**	**F. COUNTY CODE (If known)**
6 Toccoa	GA	30577	

ONTINUED FROM THE FRONT

II. SIC CODES (4-digit, in order of priority)

A. FIRST	B. SECOND
3471 (specify) Electroplating	C 7 3425 (specify) Hand saws and power saw blad
C. THIRD	**D. FOURTH**
(specify)	C 7 (specify)

III. OPERATOR INFORMATION

A. NAME

Vermont American Corp. Toccoa Division

B. Is the name listed in Item VIII-A also the owner? ☒ YES ☐ NO

C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.)

F = FEDERAL
S = STATE
P = PRIVATE
M = PUBLIC (other than federal or state)
O = OTHER (specify)

P (specify)

D. PHONE (area code & no.)

C A 404 779 3391

E. STREET OR P.O. BOX

P. O. Box 787

F. CITY OR TOWN

Toccoa

G. STATE GA

H. ZIP CODE 30577

IX. INDIAN LAND

Is the facility located on Indian lands? ☐ YES ☒ NO

. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water): T N

D. PSD (Air Emissions from Proposed Sources): C T 9 P

B. UIC (Underground Injection of Fluids): T U

E. OTHER (specify): C T 9 (specify)

C. RCRA (Hazardous Wastes): T R

E. OTHER (specify): C T 9 (specify)

. MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property bounderies. The map must show he outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste reatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface vater bodies in the map area. See instructions for precise requirements.

L. NATURE OF BUSINESS (provide a brief description)

Manufacturer of circular saw blades.

I. CERTIFICATION (see instructions)

certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all ttachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the pplication, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting lse information, including the possibility of fine and imprisonment.

NAME & OFFICIAL TITLE (type or print)	B. SIGNATURE	C. DATE SIGNED
N. E. Cowley, Ex. Vice President	[signature]	11-19-80

MMENTS FOR OFFICIAL USE ONLY

Vermont American Corp, Ferrara Div

print or type in the unshaded areas only
(areas are spaced for elite type, i.e., 12 characters per inch).

Form Approved OMB No. 158-S80004

U.S. ENVIRONMENTAL PROTECTION AGENCY

HAZARDOUS WASTE PERMIT APPLICATION

Consolidated Permits Program

(This information is required under Section 3005 of RCRA.)

I. EPA I.D. NUMBER

													F/A	C
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
F	G	A	D	0	3	H	3	6	2	6	5	6		1

OFFICIAL USE ONLY

APPLICATION APPROVED	DATE RECEIVED (yr., mo., & day)	COMMENTS
23	24 - 29	

FIRST OR REVISED APPLICATION

Enter an "X" in the appropriate box in A or B below *(mark one box only)* to indicate whether this is the first application you are submitting for your facility or a revised application. If this is your first application and you already know your facility's EPA I.D. Number, or if this is a revised application, enter your facility's EPA I.D. Number in Item I above.

FIRST APPLICATION *(place an "X" below and provide the appropriate date)*

- [ ] 1. EXISTING FACILITY *(See instructions for definition of "existing" facility. Complete item below.)* (31)
- [X] 2. NEW FACILITY *(Complete item below.)* (31)

FOR EXISTING FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR THE DATE CONSTRUCTION COMMENCED *(use the boxes to the left)*

YR.	MO.	DAY
32 33	34 35	36 37

FOR NEW FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR IS EXPECTED TO BEGIN

YR.	MO.	DAY
32 33	34 35	36 37
7 7	0 9	1 5

REVISED APPLICATION *(place an "X" below and complete Item I above)*

- [ ] 1. FACILITY HAS INTERIM STATUS (32)
- [ ] 2. FACILITY HAS A RCRA PERMIT (33)

PROCESSES — CODES AND DESIGN CAPACITIES

PROCESS CODE — Enter the code from the list of process codes below that best describes each process to be used at the facility. Ten lines are provided for entering codes. If more lines are needed, enter the code(s) in the space provided. If a process will be used that is not included in the list of codes below, then describe the process *(including its design capacity)* in the space provided on the form *(Item III-C)*.

PROCESS DESIGN CAPACITY — For each code entered in column A enter the capacity of the process.
AMOUNT — Enter the amount.
UNIT OF MEASURE — For each amount entered in column B(1), enter the code from the list of unit measure codes below that describes the unit of measure used. Only the units of measure that are listed below should be used.

PROCESS	PROCESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
Storage:		
CONTAINER *(barrel, drum, etc.)*	S01	GALLONS OR LITERS
TANK	S02	GALLONS OR LITERS
WASTE PILE	S03	CUBIC YARDS OR CUBIC METERS
SURFACE IMPOUNDMENT	S04	GALLONS OR LITERS
Disposal:		
INJECTION WELL	D79	GALLONS OR LITERS
LANDFILL	D80	ACRE-FEET *(the volume that would cover one acre to a depth of one foot)* OR HECTARE-METER
LAND APPLICATION	D81	ACRES OR HECTARES
OCEAN DISPOSAL	D82	GALLONS PER DAY OR LITERS PER DAY
SURFACE IMPOUNDMENT	D83	GALLONS OR LITERS

PROCESS	PROCESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
Treatment:		
TANK	T01	GALLONS PER DAY OR LITERS PER DAY
SURFACE IMPOUNDMENT	T02	GALLONS PER DAY OR LITERS PER DAY
INCINERATOR	T03	TONS PER HOUR OR METRIC TONS PER HOUR; GALLONS PER HOUR OR LITERS PER HOUR
OTHER *(Use for physical, chemical, thermal or biological treatment processes not occurring in tanks, surface impoundments or incinerators. Describe the processes in the space provided; Item III-C.)*	T04	GALLONS PER DAY OR LITERS PER DAY

UNIT OF MEASURE	UNIT OF MEASURE CODE
GALLONS	G
LITERS	L
CUBIC YARDS	Y
CUBIC METERS	C
GALLONS PER DAY	U
LITERS PER DAY	V
TONS PER HOUR	D
METRIC TONS PER HOUR	W
GALLONS PER HOUR	E
LITERS PER HOUR	H
ACRE-FEET	A
HECTARE-METER	F
ACRES	B
HECTARES	Q

EXAMPLE FOR COMPLETING ITEM III *(shown in line numbers X-1 and X-2 below)*: A facility has two storage tanks, one tank can hold 200 gallons and the other can hold 400 gallons. The facility also has an incinerator that can burn up to 20 gallons per hour.

DUP F/A: C: 1

LINE NUMBER	A. PROCESS CODE (from list above)	B. PROCESS DESIGN CAPACITY 1. AMOUNT (specify)	B. PROCESS DESIGN CAPACITY 2. UNIT OF MEASURE (enter code)	FOR OFFICIAL USE ONLY
2		600	G	
3		20	E	
1		8,333	G	
5				
6				
7				
8				
9				

LINE NUMBER	A. PROCESS CODE (from list above)	B. PROCESS DESIGN CAPACITY 1. AMOUNT	B. PROCESS DESIGN CAPACITY 2. UNIT OF MEASURE (enter code)	FOR OFFICIAL USE ONLY

Continued from the front.

III. PROCESSES *(continued)*

C. SPACE FOR ADDITIONAL PROCESS CODES OR FOR DESCRIBING OTHER PROCESSES *(code "T04")*. FOR EACH PROCESS ENTERED HERE INCLUDE DESIGN CAPACITY.

IV. DESCRIPTION OF HAZARDOUS WASTES

A. EPA HAZARDOUS WASTE NUMBER — Enter the four–digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If y handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four–digit number*(s)* from 40 CFR, Subpart C that describes the characte tics and/or the toxic contaminants of those hazardous wastes.

B. ESTIMATED ANNUAL QUANTITY — For each listed waste entered in column A estimate the quantity of that waste that will be handled on an ann ba... For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non–listed waste*(s)* that will be hand which possess that characteristic or contaminant.

C. UNIT OF MEASURE — For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropri codes are:

ENGLISH UNIT OF MEASURE	CODE	METRIC UNIT OF MEASURE	CODE
POUNDS	P	KILOGRAMS	K
TONS	T	METRIC TONS	M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking ir account the appropriate density or specific gravity of the waste.

D. PROCESSES

1. PROCESS CODES:

For listed hazardous waste: For each listed hazardous waste entered in column A select the code*(s)* from the list of process codes contained in Item to indicate how the waste will be stored, treated, and/or disposed of at the facility.

For non–listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code*(s)* from the list of process co contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non–listed hazardous wastes that poss that characteristic or toxic contaminant.

Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in t extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code*(s)*.

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

OTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER — Hazardous wastes that can be described ore than one EPA Hazardous Waste Number shall be described on the form as follows:

1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B,C, and D by estimating the total ann quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
2. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line en "included with above" and make no other entries on that line.
3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

AMPLE FOR COMPLETING ITEM IV *(shown in line numbers X-1, X-2, X-3, and X-4 below)* — A facility will treat and dispose of an estimated 900 pou year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non–listed wastes. Two wa corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estima) pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES 1. PROCESS CODES (enter)	D. PROCESSES 2. PROCESS DESCRIPTION (if a code is not entered in D(1))
1	K 0 5 4	900	P	T 0 3 D 8 0	
2	D 0 0 2	400	P	T 0 3 D 8 0	
3	D 0 0 1	100	P	T 0 3 D 8 0	

Vermont American Corp, [illegible] Div

continued from page 2.
NOTE: Photocopy this page before c[illegible]eting if you have more than 26 wastes to list.

Form Approved OMB No. 158-S.

EPA I.D. NUMBER (enter from page 1)	T/A	C	FOR OFFICIAL USE ONLY	T/A	C	
W		1	W DUP		2	DUP

IV. DESCRIPTION OF HAZARDOUS WASTES (continued)

LINE NO.	A. EPA HAZARD. WASTE NO (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES 1. PROCESS CODES (enter)				D. PROCESSES 2. PROCESS DESCRIPTION (If a code is not entered in D(1))
1	F006	20,000	P	T01	T04			Filter Press LF Hazardous w. SCA P.
2	F007	10,000	P	T01				+6→+3 Chrome Reduction
3	F008	4500	P	T01				
4	F009	45,000	P	T01				Treatment processing Center pH adjustment Tank
5								Collection Tank Reduction Tank
6		Filter Press		T04				2 metal + 2 concrete
7								
8								
9								
10								
11								
12								
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15								
16								
17								
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22								
23								
24								
25								
26								

Continued from the front.

IV. DESCRIPTION OF HAZARDOUS WASTES *(continued)*

E. USE THIS SPACE TO LIST ADDITIONAL PROCESS CODES FROM ITEM D(1) ON PAGE 3.

EPA I.D. NO. *(enter from page 1)*

F 6

V. FACILITY DRAWING

All existing facilities must include in the space provided on page 5 a scale drawing of the facility *(see instructions for more detail)*.

VI. PHOTOGRAPHS

All existing facilities must include photographs *(aerial or ground–level)* that clearly delineate all existing structures; existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas *(see instructions for more detail)*.

VII. FACILITY GEOGRAPHIC LOCATION

LATITUDE *(degrees, minutes, & seconds)*	LONGITUDE *(degrees, minutes, & seconds)*

VIII. FACILITY OWNER

☒ A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below.

☐ B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:

1. NAME OF FACILITY'S LEGAL OWNER	2. PHONE NO. *(area code & n*

3. STREET OR P.O. BOX	4. CITY OR TOWN	5. ST.	6. ZIP CODE
	C G		

X. OWNER CERTIFICATION

certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached ocuments, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the ibmitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, cluding the possibility of fine and imprisonment.

A. NAME *(print or type)*	B. SIGNATURE	C. DATE SIGNED
! E. Cowley, Ex Vice-President	William E Cowley	11-19-80

XI. OPERATOR CERTIFICATION

certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached ocuments, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the bmitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, cluding the possibility of fine and imprisonment.

Atlanta GA.

CITY OF TOCCOA

M E M O R A N D U M

Date: 9-28-76

To: Elly F. Johnson, City Manager

From: John W. Sosebee, Water & Wastewater Director

Re: Wastewater discharge requirements of Vermont American Corporation.

I received a telephone call from Mr. Roland Allen of Vermont American Corporation in relation to our requirements of the level of chromium that would be permissable to discharge into the City of Toccoa Wastewater Facilities.

After talking to Mr. Mike Creason of the Industrial Waste Section, GA Department of Natural Resources - Environmental Protection Division and with Mr. Edward Gilbert of the Municipal Waste Section, GA Department of Natural Resources - Environmental Protection Division, the conclusion at that time was that we would be at a safe level if we held the chromium content at 1.0 mg./L or less.

New standards which will be developed by EPA and EPD by June, 1977 could be different from the present standards.

Basically, our present requirements on this particular installation are as follows:

1- Preliminary treatment would be required.
2- The temperature of the wastewater discharged into our system could not be higher than 150° F.
3 - Wastewater pH could not be lower than 5.5 or higher than 9.0.
4 - Total chromium level could not exceed 1.0 mg./L

I would like to call your attention to Chapter 24 - Utilities Section 24-71 and 24-73 of the Code of Ordinances of the City of Toccoa.

Another factor that should be considered in relation to Vermont American Corporation is the installation of a back flow prevention device on the water supply main whereby we may be assured that no potential hazard would be created from this industry. (RE: Chapter 24 - Section 24-31.)

VERMONT AMERICAN CORPORATION

Post Office Box 1475
Louisville, Kentucky 40201
Telephone 502/587-6851

July 7, 1977

LAND PROTECTION BRANCH

Joseph W. Newton
Environmental Engineer
Solid Waste Management Section
EPD
270 Washington St., S.W.
Atlanta, GA 30334

Dear Mr. Newton:

Please find enclosed a lab report on the sludge from water treatment at our Bristol, Virginia division. This should represent very well the material we would be taking to the landfill at Toccoa, GA.

If you send Mr. Tomoson a permit to accept this material at the landfill, please send me a copy for my records at the address above. Thank you.

Yours truly,

VERMONT AMERICAN CORPORATION

Wendell Jewett
Corporate Engineer

WJ:ln

Enc.

File

Department of Natural Resources
ENVIRONMENTAL PROTECTION DIVISION
270 WASHINGTON STREET, S W
ATLANTA, GEORGIA 30334

JOE D. TANNER
Commissioner

J. LEONARD LEDBETTER
Division Director

August 24, 1977

Mr. Jack Cronland, President
ATTN: Mr. Wendell Jewett
Corporate Engineer
Vermont American Corporation
P. O. Box 787
Toccoa, Georgia 30577

REFERENCE: Your letter to Joseph W. Newton, dated July 7, 1977 submitting a laboratory analysis of the sludge you desire to dispose of in the Stephens County Sanitary Landfill.

Dear Mr. Jewett:

Under conditions of basis pH Chrome hydroxide ($Cr(oH)_3$ is considered insoluble in water; conversely, under acidic conditions, which is characteristic of Georgia's soils and sanitary landfills, it becomes soluble and a potential contaminant of groundwater. On this basis routine sanitary landfilling (incorporation with garbage into daily working face) is not considered an acceptable long-range disposal solution.

I regret to inform you that no permitted chemical (hazardous) waste sanitary landfill is available in Georgia at this time and it remains for each industry to take the initiative in solving its solid waste management problems. Although other alternatives may exist and would be considered by this office, the following are acceptable and attainable long term solutions:

1. Construct a chemical waste sanitary landfill. Construction and operation of such a facility must comply with Georgia's "Solid Waste Management Act" and "Rules and Regulations for Solid Waste Management", Chapter 391-3-4. Should you choose this alternative I have enclosed a copy of "Guidelines for the Management of Hazardous Solid Wastes" which will assist you in complying with the Act and Rules and Regulations.

2. Contract with an approved disposal company. As previously stated, there are none available in Georgia; however, Gordon Service Company, Gordon, Wilkinson County, Georgia is presently applying for a permit to operate a chemical waste sanitary landfill. Barring any unforseen difficulties this facility should be operational within a few months. Outside the state there are several companies, some within a relatively short haul distance, which are approved. For your convenience I have enclosed a partial listing of these facilities.

In the event you elect not to implement a plan for long term solution at this time, this office is prepared to grant, for the interim period ending August 31, 1978 or until an approved facility, with a haul distance shorter than Gordon Service Company, is available in Georgia, permission to dispose of the sludge in a segregated area of the Stephens County Sanitary Landfill property. Disposal

must be in accordance with the "Rules and Regulations for Solid Waste Management", Chapter 391-3-4, and the "Guidelines for Sanitary Landfill or Landfill Disposal of Liquid, Semi-Solid, and Industrial Sludge Wastes". In addition to the requirements outlined in the Rules and Regulations and Guidelines, the following criteria must also be complied with:

1) The sludge disposal area must be segregated from the putrescible waste disposal area by a minimum distance of 25 feet.

2) The sludge disposal area must never be used for any other type of waste disposal.

3) A blanket of lime, minimum thickness of twelve (12) inches, must be placed in the bottom of the trenches proposed to be filled with sludge.

4) Immediately after placement of the sludge in the trench, a six (6) inch thick layer of lime must be placed over the sludge then covered with earth to a minimum thickness of two (2) feet.

Mr. Trigger Thomason, County Coordinator, indicated at the meeting in Toccoa on June 21, which was attended by J. W. Newton of this office, that the special handling conditions for sludges would pose no problem.

During this interim period we request that you continue to seek a long term solution and forward a proposed plan to this office. If an acceptable plan is not submitted during this interim period, we will re-evaluate the problem on September 1, 1978 and based upon the alternatives available at that time, specifiy additional requirements.

Your interest in promoting a better environment for Georgia is appreciated and continually encouraged. If we can be of further assistance please feel free to call.

Sincerely,

John D. Taylor, Jr., Program Manager
Industrial Solid Waste Control and
Resource Recovery Program

JDT,Jr:ejt

Enclosures (5)

cc: James W. Dunbar
Trigger Thomason
Joseph W. Newton
Bob Bishop

ENVIRONMENTAL PROTECTION DIVISION
SOLID WASTE MANAGEMENT SECTION
FACILITY INFORMATION REPORT

F-R

REPORT #:
REPORT DATE: 3/20/78

FACILITY ID	REGION	COUNTY	SIC CODE	STAFF	HOURS	REVIEWED BY	CODED
	N. Ga.	Stephens	331260	Joseph W. Newton	3.0	JWN 8	

1. FACILITY INFORMATION

FACILITY NAME: Vermont American FACILITY TYPE: Manufactures circular saw blades

ADDRESS: P. O. Box 787 CITY: Toccoa, Georgia ZIP: 30577

TELEPHONE: 404/779-3391 HOURS: 3 - 8 hr. shifts # OF EMPLOYEES: 123

PERSON CONTACTED: Jack Cronland TITLE: President

2. ACTION INFORMATION

PROGRAM ACTIVITY: Inspection and Compliance - Industrial

INVESTIGATION DATE: March 1, 1978 FOLLOW-UP DATE: June 1, 1978

ACTIONS	FINDINGS / DECISIONS	NEXT ACTIONS
Inspection, initial	Facility not in violation of Rules and Regulations.	Inspect to be sure interim disposal of chrome hydroxide sludge meets interim approval.

1-29-81
CFF

3. RESIDUAL MANAGEMENT INFORMATION

RESIDUAL #	I/O	COMMON NAME	PHYSICAL FORM	ANNUAL VOLUME/ WEIGHT	HANDLING CODE	SPECIAL SUBSTANCE	CONC	SPECIAL PROPERTIES	S	C	P	R	D
1	0	Ind. Waste Water Treat Sludge ~~Chrome Hydroxide~~	Sludge	* 2640 lbs/month	Haz.	Chromium	Lab.	Toxic and irritant		*			*
2	0	Dust (abrasive steel)	Solid	18,000 #	Non-Haz.	0	0	0		x			
3	0	Garbage	Solid	90,000 #	Non-Haz.	0	0	0		x			x

4. RESIDUAL STORAGE INFORMATION

RESIDUAL #	PERMIT	LOCATION	DURATION	NUMBER AND TYPE OF CONTAINER(S)	STORAGE CAPACITY

RESIDUAL #	PERMIT	VOLUME COLLECTED / TIME	NAME	COUNTY	AGENCY	EQUIPMENT
1	Not Req.	*	County SLF	Stephens	Company Truck	Flat-bed Truck
2	No Action	1500 #/mo.	County SLF	Stephens	N.E. Ga. Waste Co.	Roll-off container
	begun					
3	"	7500 #/mo.	County SLF	Stephens	N.E. Ga. Waste Co.	Roll-off container

6. PROCESSING INFORMATION — FACILITY — PROCESS DESCRIPTION

RESIDUAL #	PERMIT	VOLUME PROCESSED / TIME	NAME	COUNTY	TYPE	METHOD

7. RECLAMATION INFORMATION — MARKETING INFORMATION

RESIDUAL #	PERMIT	VOLUME RECLAIMED / TIME	IN-PLANT RECLAMATION DESCRIPTION	MARKET	LOCATION
			1-29-80 Fehn		

8. DISPOSAL INFORMATION — (SCA = South Carolina) — FACILITY

RESIDUAL #	PERMIT	VOLUME DISPOSED / TIME	NAME	COUNTY	SITE TYPE	SITE ACCESS
1	Issued	*	County SLF	Stephens	SLF - Daily Cover	Public
2	"	1500 #/mo.	"	"	"	"
3	"	7500 #/mo.	"	"	"	"

9. COMMENTS *Not enough produced to date to either collect or make disposal. Production has just begun at this plant, but it is figured that by June 1, 1978 at least one disposal will have been made of the chrome hydroxide (residual #1). Vermont American is leaning toward Gordon Service Co. as a long term disposal site for their hazardous waste. All other disposal procedures, at the time of this inspection, comply with the Rules and Regulations.

cc: Robert Bishop James Dunbar

File

Department of Natural Resources

ENVIRONMENTAL PROTECTION DIVISION
270 WASHINGTON STREET, S.W.
ATLANTA, GEORGIA 30334

JOE D. TANNER
Commissioner

J. LEONARD LEDBETTER
Division Director

September 26, 1978

Mr. Wendell Jewett
Corporate Engineer
Vermont American Corporation
P. O. Box 1475
Louisville, Kentucky 40201

Re: September 22, 1978 Telephone Conversation Regarding Disposal of Waste Water Treatment Sludge From Your Toccoa, Georgia Plant at the Gordon Service Company, Gordon, Georgia

Dear Mr. Jewett:

As we discussed in the referenced telephone conversation, operations at the Gordon Service Company have been suspended. Should the suspension become permanent, you only have two options available for disposal of the referenced sludge; they are:

(1) Transport the waste to an approved disposal facility outside the State of Georgia.

(2) Submit a procedure for handling the waste as specified in paragraph 391-3-4-.04 (5) of the Rules and Regulations for Solid Waste Management (copy enclosed) to the Director of Georgia's Environmental Protection Division.

Sincerely,

Joseph W. Newton

Joseph W. Newton
Environmental Engineer
Industrial and Hazardous Waste
Management Program

JWN:ejt

Enclosure: Rules and Regulations for Solid Waste Management

cc: Robert Bishop, Manager, North Georgia Region
Environmental Protection Division

ENVIRONMENTAL PROTECTION DIVISION
SOLID WASTE MANAGEMENT SECTION
ACTION REPORT

3/1/79

FACILITY ID	REGION	COUNTY	HOURS	REVIEWED BY	CODED
	North (4)	Stephens (127)	4.0	HWB	

FACILITY NAME Vermont American

ADDRESS P. O. Box 787 CITY Toccoa ZIP 30577

PERSON(S) CONTACTED Jack Cronland TITLE Plant Manager

TRIP BY Joseph W. Newton ACCOMPANIED BY None

INVESTIGATION DATE 2/22/79 FOLLOW-UP DATE August 22, 1979

REFERENCE N/A

PROGRAM ACTIVITY Inspection and Compliance - Industrial (03)

ACTIONS	FINDINGS / DECISIONS	NEXT ACTIONS
Inspection, Routine (38)	Facility Not in violation of Rules and Regulations (71)	Inspection, Routine (38)

COMMENTS, CONCLUSIONS, AND RECOMMENDATIONS: Vermont American is storing the chromium contaminated sludge from their wastewater treatment plant in 55 gallon steel drums. The present accumulation is 15 drums. Current plans are to ship these drums to SCA Services of South Carolina for disposal.

CONCLUSIONS: Vermont American is maintaining compliance by shipping the hazardous wastewater sludge to an approved out of state disposal facility.

RECOMMENDATIONS: Make routine inspection on follow-up date and verify that sludge is being shipped to SCA.

ENVIRONMENTAL PROTECTION DIVISION
SOLID WASTE MANAGEMENT SECTION
ACTION REPORT
FORM SHEET 1

REPORT DATE: 1-30-81

CODE FILE	EPA OR STATE FACILITY I.D. NUMBER	INVESTIGATION DATE	FOLLOW-UP DATE	SIC CODE	REGION (02)	COUNTY (03)	FDS* CODE (01)	STAFF NAME & CODE	HOURS FIELD	HOURS OFFICE	REVIEW BY
1	GAD084362656 Gen. & Storage	1-29-81	7-1-81	3425	North	Stephens		Fehn		4	

FACILITY NAME: Vermont American Corporation
FIR DATE FILED: updated Jan. 29, 1981
ADDRESS: P.O. Box 787
CITY: Toccoa
ZIP CODE: 30577
PERSON(S) CONTACTED: Mr. Wendell Jewett
TITLE: Corp. Engineer
TEL.NO.: 502/587-6851
REFERENCE: Facility File
PROGRAM ACTIVITY: Industrial Inspection & Compliance

ACTIONS	WASTE CLASS	FINDINGS/DECISIONS	NEXT ACTIONS
44 telephone discussions	haz	71 facility not in violation of rules & regs	38 routine inspection

COMMENTS, CONCLUSIONS, AND RECOMMENDATIONS:

1. I was contacted by Mr. Wendell Jewett. He sought State permission for the State to approve th sanitary landfill disposal of their dewatered electroplating, wastewater sludge. The sludge i processed through reduction facilities which lowers chromium six to chromium three. The gener tion rate is about 2640 pounds per month. The sludge is stored in 55-gallon drums for 3 month and then shipped to SCA in Pinewood, South Carolina. The company has not filed a Part A, as they intend not to store the sludge for longer than 90 days.
2. Following Mr. Taylor's letter of August 24, 1977, only one load of reduced, solidified sludge was taken to the Stephens County SLF.
3. This plant makes circular saw blades and electroplates chromium on steel.
4. The waste is listed as F006.
5. Mr. Jewett indicated that his company would apply for delisting or a temporary exclusion.

CONCLUSIONS: This is presently a listed hazardous waste.

RECOMMENDATIONS: Make an inspection of the plant by July 1, 1981 and re-evaluate the situation as new Federal Registers are received.

cc: James Dunbar
Robert Bishop

South Carolina Department of Health and Environmental Control

SC 3475

2600 Bull Street
Columbia, S.C. 29201

November 23, 1979

File

Jack Cronland
Vermont American Corp.
Toccoa Division
P.O. Box 787
Toccoa, Georgia 30577

IN RE: Disposal of Chrome Hydroxide Sludge at SCSCA Chemical Services in Pinewood, South Carolina -- Sumter County

Dear Mr. Cronland:

This office hereby grants approval for disposal of the above referenced waste at the referenced site. Approval is for 41 drums at present and 12 drums per month thereafter.

Transport of this material must be in such a manner to prevent spillage or leakage and must comply with all State Public Service Commission and Department of Transportation regulations. It is the responsibility of Vermont American Corp. and the hauler of the waste to ensure that adequate transportation vehicles are used.

The enclosed Manifest Form is to be used in conjunction with the disposal of this waste. Vermont American Corp. must fill out completely the appropriate portion of the form and return the pink copy to this office upon shipment of the waste. The yellow and white copies shall be sent with the waste when transported to the disposal facility with the remainder of the form completed by indicated parties. The disposal facility shall verify the accuracy of the Manifest and return the yellow copy to this office. This Division retains the right to sample any waste going to this site to ensure compliance with the manifest.

Any changes in composition or volume of this waste, or if any problems are encountered during disposal, this authorization will be nullified. Disposal of this waste at other than the requested facility will require prior written approval from this office.

Sincerely,

Earl Williams

Earl M. Williams, Jr., P.E., Manager
Industrial Waste Section
Solid Waste Management Division

EMW/CAM/kk
cc: W.E. Stilwell
Capers Dixon
Moses McCall
Enclosure

ELECTROP ING POINT SOURCE CATEGORY REP .ING FORM

0 0 - 0 9 1

1. Company Name Vermont American Corporation, Toccoa Division

   Address P.O. Box 787, Toccoa, Georgia 30577

2. Plant Location Same as Above

   Address

3. a. Nature of Operation(s) b. Rate of Production c. Subpart ‡

   Fabrication and Chrome · 4,500,000 pcs./year See Below

   Plating of Saw Blades

   S.I.C. Code #32423 Hand and Edge Tools (drills, bits, taps, files)
   (#32425) Hand Saws and Power/Saw Blades

4. Wastewater discharge to Publicly Owned Treatment Works (POTW) in gallons per day.

a. Total Plant Wastewater Flow	Average (GPD)	Maximum (GPD)
	29,600	36,400

5. Nature and Concentration of Pollutants. If daily water outflow is less than 10,000 gpd, report on b, g, and h. If more than 10,000 gpd, report a,c,d,e,f,g,

Pollutant	Maximum for any 1 Day mg/liter		Average of Daily Values for 4 Consecutive Working Days-mg/li	
	Our Discharge	Pretreatment Standards ‡	Our Discharge	Pretreatment Standards ‡
a. Cyanide, Total or:		1.9	.14	1.0
b. Cyanide, (Amenable)		5.0		2.7
c. Copper *		4.5	.07	2.7
d. Nickel *		4.1	.09	2.6
e. Chromium, Total *		7.0	10.2	4.0
f. Zinc *		4.2	.225	2.6
g. Lead		0.6	.115	0.4
h. Cadmium		1.2	.01	0.7
i. Total Metals (c,d,e,f)*		10.5	10.585	6.8

‡ Applicable Pretreatment Standards - Sub part A - Electroplating of Common Metals Category (413.10)

6. Are the applicable pretreatment standards being met on a consistent basis?

Yes _____ No X

Remarks Mixing of polymer in chromium reduction unit was found not be satisfactory to extract all chrome.

If not, is additional operation and maintenance (O. and M.) and/or additional pr treatment required for the above company to meet the Pretreatment Standards and Requirements?

Yes X No _____

Remarks A new polymer mixing unit must be designed, ordered, and installed to meet compliance.

7. If additional pretreatment and/or O. and M. are required to meet the Pretreatment Standards, submit the shortest schedule by which the above named company will pro such additional pretreatment. The completion date in this schedule shall not be l than the compliance date established for the applicable Pretreatment Standard. F the Electroplating Point Source Category, the compliance date is October 1, 1982

The following conditions apply to this required schedule according to Section 403 June 26, 1978 Federal Register.

i The schedule shall contain a list of the major events leading to compliance. The expected dates of completion of such events shall also be given.
ii The completion dates of any two successive events shall not exceed 9 months.
iii Within 14 days after the completion of each event, the Industrial User shall a progress report to the Contro. Authority indicating:

a. date the event was completed.

b. if the event is not completed as scheduled, the reason for the delay.

c. the expected date of completion.

d. steps taken by the Industrial User to return to the established schedule.

11/10/80	Design started with Corporate Waste Treatment Engineers
11/19/80	Purchase order issued for manufacture of mixing unit
5/30/80	Mixing Unit to be received from manufacturer
6/30/80	Installation of mixing unit in Chromium Reduction System
8/30/80	Tests completed for compliance under Item 5 this report
9/15/80	Notification to E.P.A. of Compliance

We declare that we have examined this report and certify that to the best of our knowledge and belief, it is true, correct and complete.

Certified by: Jimmy K Carlton Title Project Engineer

Date 11/20/80

Reviewed by: Robert R. Lee III Title General Manager

Date 11/20/80

The above compliance schedule must be certified by a qualified professional and reviewed by an authorized representative of the Industrial User.

An authorized representative may be:

(1) A principal executive officer of at least the level of vice president, if the Industrial User submitting the report is a corporation.

(2) A general partner or proprietor if the Industrial User submitting the report is a partnership or sole proprietorship, respectively.

(3) A duly authorized representative is responsible for the overall operation of the facility from which the Indirect Discharge originates.

7

Department of Natural Resources
ENVIRONMENTAL PROTECTION DIVISION
270 WASHINGTON STREET, S.W.
ATLANTA, GEORGIA 30334

JOE D. TANNER
Commissioner

J. LEONARD LEDBETTER
Division Director

File (R)

TRIP REPORT

January 4, 1983

Site Name & Location: Vermont American Corporation Div., P.O. Box 787, Meadowbrook Industrial Park, Toccoa, Stephens County, Georgia

Trip By: Betty Burns BB

Date of Trip: December 8, 1982

Officials Contacted: Robson Sage, Plant Manager
Tommy Carlton, Plant Engineer

Facility SIC: 3425 - Manufactures circular saw blades

Reference: Facility File/letter dated July 8, 1982 requesting withdrawal of their RCRA permit application.

Comments:
This facility effects the following processes:

1. Metal heat treating operation involving the use of high heating and quenching salts. This waste is generated as a hard salt block, about 3-4 blocks per week totally approximately 1000 pounds (declared as non-hazardous by facility - no cyanide said to be used - and is disposed in local landfill).
2. Blade grinding operation involving smoothing of product and spraying with lubricant and rust prohibiting solution. This activity generates a swarf waste consisting of steel and sand solid from bottom of unit which recycles grinding liquid solution back to the operation. This activity generates about a 2 yd^3 size dumpster of solids per week or so and is disposed of with regular garbage.
3. Blanking press generates approximately 300,000 lbs of scrap metal per year which is handled by Greenville Scrap Metal Company, Greenville, SC, on a weekly basis.
4. Lubricating oil is recovered from floor areas by mopping - mop rinsing water and oils generates about 1-2 drums every 3 months. This material is sold to SCA Services of SC.
5. Silk screening operation generates ink-laquer contamination waste, about 1-55 gallon drum per month. This material declared as non-hazardous by facility in accordance with RCRA criteria (however, flammable factor involved) and is sent to Harwell Systems in Lamore, NC to incineration for BTU value.
6. Trichloroethyle degreasing process which generated approximately 1-55 gallon drum of contaminated material every month was discontinued about 3 months ago. This has been replaced by detergent washing. Solution from washing is continuously neutralized and recycled.

7. Chrome plating process involves alkaline wash, water rinse, acid pickle cleaning, spray rinse of acid, electro cleaning of acid, stripping cleaner, dip rinse, chrome bath plating, 3 cold water rinses, and 1 final hot water rinse. There are 3 set ups of chrome plating lines. The last chrme line is an experimental situation in which the object is to reduce chrome contamination. Normal use of transporting rack is deleted from this unit. The racks are said to carry drag out from chrome plating tanks to non-chrome tanks. Also, facility notes that this will decrease chrome quantity going into wastewater treatment system.

The facility wastewater treatment system consist of the following:

1. An 83,000 gallon capacity cement tank is constructed in floor of building. This tank is separated into two sections. The chrome plating wastewater enters the first section where the pH is raised from 6.5 to 7.5. The wastewater is then pumped to the Andco Systems (metal tank unit) for electrochemical process which changes hexavalent chrome to trivalent chrome. The material is then pumped to another metal tank for flask rinse to minimize hydrogen chloride gas created during chrome reduction process, then to another tank unit for addition of a polymer, then over flow to clarifier unit where solids drop out, then to filter press for sludge dewatering treatment, effluent is channeled to sewer at this point also. Water from filter press in recycled back to 2nd section of the 1st large cement floor tank which is said to maintained in any flow from the first section.

Conclusions:

1. Based on inspection observation and explanation of the facility's wastewater treatment system of which facility states that large capacity cement in-floor tank with depth of 12 ft. and wall thickness of 12" at all times is capable of maintaining the chrome plating line waste and wastewater, this division determines that Vermont American Corp., Toccoa Division's wastewater treatment system, with effluent noted as being subject to city sewer discharge limitation, is classified as a "totally enclosed waste stream as delineated per 40 CFR Section 260.10 and/or a TSD Permit-By-Rule facility as specified under 40 CFR Section 266 as amended under the November 17, 1980 Hazardous Waste Management Rules.
2. Approve facility's request to withdraw their RCRA permit application.
3. Change facility hazardous waste status to generator.
4. Even if the F006 waste is delisted, the facility will occasionally generate spent tank solutions from chrom plating tanks.

Recommendations and Follow Up Required:

1. Notify facility of the above decision by letter (change of activity status).

Reviewed By:

BB:bpk:2036C

File - Facility RED R

Department of Natural Resources
ENVIRONMENTAL PROTECTION DIVISION
270 WASHINGTON STREET, S.W.
ATLANTA, GEORGIA 30334

JOE D. TANNER
Commissioner

J. LEONARD LEDBETTER
Division Director

TRIP REPORT
August 30, 1984

Site Name and Location: Vermont American Corporation, Toccoa Division, Toccoa, Georgia

Trip By: Betty Burns BB

Accompanied By: None

Date of Trip: August 9, 1984

Official Contacted: Mr. Tommy Carlton, Project Engineer

Reference: Facility File - letter dated August 7, 1984

Comments:

1. Vermont American manufactures circular saw blades.
2. The processing operations inspected include grinding, cutting, shaping, ink stamping, and chrome plating. The processing operations that generate hazardous waste involve the ink stamping and chrome plating. The ink stamping process generates an ink and lacquer thinner classified by the facility as EPA hazardous waste D001. The D001 waste, one fifty-five gallon drum every three months, is shipped to Caldwell Systems, Lenora, North Carolina quarterly for incineration. The chrome plating operation consisting of three identical plating lines to include tanks of alkaline wash solution tanks, spray water rinse tanks, acid pickle rinse solution tanks, electroclean (electrolyte alkaline solution), counter flow rinse water dip tanks, drip tanks, chrome plating tanks, cold water rinse counter flow dip tanks, and hot water rinse dip tanks. The alkaline wash solutions, electroclean solutions and acid solutions from the chrome plating lines when no longer useable, are dipped out of the process tanks, and placed in 55-gallon drums for use in the facility's wastewater pretreatment system for pH adjustment. The chrome plating tanks, when too contaminated or no longer useable, are drummed up (once per year 14 55-gallon drums, classified as D002 and D007), and disposed of by SCA Services of Pinewood, South Carolina. The rinse tanks in the plating line continuously overflow in a manner wherein the skimmings on the top of these tanks are collected in a flow drain underneath the plating line. The rinsewater skimming from the drain, flow to the automated wastewater pretreatment system in which it receives pH adjustment, chrome reduction from stage +6 to +3, clarification/flocculation and dewatering. The dewatering system is a filter press that generates a chrome hydroxide sludge which the facility has classified as F006. The F006 waste, approximately 25 drums per months, is shipped every ninety days to SCA Services of Pinewood, South Carolina for disposal.

Conclusions:

1. Based on inspection information, the company generates in excess of 2,200 pounds of hazardous waste, and is therefore, confirmed to be a hazardous waste generator.

2. The company has not complied with the Generator Standards noted below:
   391-3-11-.08/40 CFR §262.34(a)(1) "Accumulation Time", because the facility did not have available for review a weekly inspection log and inspection schedule as required by 40 CFR §265.174.

   391-3-11-.08/40 CFR §262.34(a)(4) "Accumulation Time", because the facility, since discontinuing its use of degreasing solvents, has not deleted degreasing solvent as a generated waste from its Contingency Plan as required by 40 CFR, Subpart D, §265.54.

Recommendations and Follow-Up Required:
Send Vermont American a Notice of Violation for the violations cited above in Conclusion #2.

Photographs: None

Reviewed By: SCH 9/12/84

Attachments: Contingency Plan
Generator Checklist

BB:rw:059
cc: Betty Burns
File - Vermont American Corporation - Toccoa - (R)

Department of Natural Resources
ENVIRONMENTAL PROTECTION DIVISION
270 WASHINGTON STREET S W
ATLANTA, GEORGIA 30334

JOE D. TANNER
Commissioner

J. LEONARD LEDBETTER
Division Director

January 14, 1983

Ms. Julia P. Hagan
Hamilton, Roach, & Diamond
Vermont American Building
100 East Liberty Street
Louisville, KY 40202

RE: Request for Facility Status Changes for Vermont American Corp., Toccoa, GAD084362656

Dear Ms. Hagan:

This will acknowledge receipt of your request for withdrawal of your application for a Hazardous Waste Facility permit.

Based on the information provided, withdrawal of your application is warranted and your permit application has been placed in our inactive files.

Please be advised that withdrawal of your permit application invalidates any variance that you received to continue existing hazardous waste treatment storage or disposal during the permit review process and that based on our concurrence with your withdrawal request, the Federal Environmental Protection Agency will terminate your facility's interim status.

Should you wish to treat, store, or dispose of hazardous waste in the future, it will be necessary that a hazardous waste handling permit be issued, prior to the construction of such facilities, under authority of Section 8 of the Georgia Hazardous Waste Management Act and paragraphs .10 and .11 of Georgia's Rules for Hazardous Waste Management, Chapter 391-3-11.

If further clarification is needed on this matter, please feel free to contact Ms. Betty Burns at 404/656-2833.

Sincerely,

John D. Taylor, Jr.
Program Manager
Industrial & Hazardous Waste
Management Program

JDT:bbk:2037C
cc: James H. Scarbrough
Moses N. McCall, III
File: Vermont American (Y)

Do not make entries in shaded areas OMB #: 2050-0005 Expires: 1-31-83

Copy - EPA

ENVIRONMENTAL PROTECTION AGENCY

GENERATOR ANNUAL HAZARDOUS WASTE REPORT

This report is for the calendar year ending December 31, 1981.

AFFIX LABEL HERE

Please print/type with elite type (12 characters per inch)

GENERAL INSTRUCTIONS: If you received a preprinted label attached to the mailing envelope in which this form was enclosed, affix it in the space provided. If any of the information on the label is incorrect, draw a line through it and provide the correct information in the appropriate section below. If the information is correct and complete, leave Sections I, II, and III below blank. If you did not receive a preprinted label, complete all sections. REFER TO THE SPECIFIC INSTRUCTIONS CONTAINED IN THIS BOOKLET BEFORE COMPLETING THIS FORM. The information requested in this report is required by law (Section 3002 of the Resource Conservation Recovery Act).

ENVIRONMENTAL PROTECTION DIVISION
LAND PROTECTION BRANCH

I. GENERATOR'S EPA I.D. NUMBER

T A C

F G A D 0 8 4 3 6 2 6 5 6 1

II. NAME OF INSTALLATION

V E R M O N T - A M E R I C A N - T O C C O A - D I V I S I O N

III. INSTALLATION MAILING ADDRESS

3 P O - B O X - 7 8 7

Street or P.O. Box

4 T O C C O A | G A | 3 0 5 7 7

City or Town | State | Zip Code

IV. LOCATION OF INSTALLATION (if different than section III above)

5 M E A D O W B R O O K - I N D U S T R I A L - P A R K

Street or Route number

6 T O C C O A | G A | 3 0 5 7 7

City or Town | State | Zip Code

V. INSTALLATION CONTACT

2 C A R L T O N - T O M M Y

Name (last and first)

4 0 4 - 7 7 9 - 3 3 9 1

Phone No. (area code & no.)

VI. CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Robson R. Sage, III , General Manager Robson R. Sage, III 2/9/83

Print/Type Name | Title | Signature of Authorized Representative | Date Signed

EPA Form 8700-13A(5-80) (Revised 10-82)

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ENVIRONMENTAL PROTECTION AGENCY

Generator Annual Hazardous Waste Report (cont.)

This report is for the calendar year ending December 31, 1981.

VII. GENERATOR'S EPA I.D. NO.

T/A C

G A D 0 8 4 3 6 2 6 5 6

1 2 13 14 15

VIII. FACILITY NAME (specify facility to which all wastes on this page were shipped)

SCA CHEMICAL SERVICES

IX. FACILITY'S EPA I.D. NO.

B SC D 0 7 0 3 7 5 9 8 5

16 28

X. FACILITY ADDRESS

ROUTE 1 BOX 55
PINEWOOD, S.C. 29125

XI. TRANSPORTATION SERVICES USED (List the name and EPA identification numbers of all transporters whose services were used during 1981. **This section to be completed only once.** Do not repeat on supplemental sheets.)

BRYSON ENVIRONMENTAL I.D. NUMBER SCD 00822312
108 LUADE OAKLAND
LEXINGTON, S.C.

XII. WASTE IDENTIFICATION

Line #	A. Description of Waste	B. DOT Hazard code	C. EPA Hazardous Waste No. (see instructions)		D. Amount of Waste	E. Unit of Measure
1	WASTE WATER TREATMENT SLUDGE FROM ELECTRO-PLATING	1 5	F 0 0 6		5 5 5 0 0	P
2	SLUDGE FROM BOTTOM OF ELECTRO-PLATING TANK	0 2	D 0 0 7	D 0 0 2	5 7 3 0	P
3	SPENT ELECTRO-PLATING SOLUTION	0 2	D 0 0 7	D 0 0 2	2 1 6 0 0	P
4						
5						
6						
7						
8						
9						
10						
11						
12						

XIII. COMMENTS (enter information by section number—see instructions)

Tear out here

1982 FORMS

ENVIRONMENTAL PROTECTION AGENCY

GENERATOR ANNUAL HAZARDOUS WASTE REPORT

This report is for the calendar year ending December 31, *1982*

AFFIX LABEL HERE

Please print/type with elite type (12 characters per inch)

GENERAL INSTRUCTIONS: If you received a preprinted label attached to the mailing envelope in which this form was enclosed, affix it in the space provided. If any of the information on the label is incorrect, draw a line through it and provide the correct information in the appropriate section below. If the information is correct and complete, leave Sections I, II, and III below blank. If you did not receive a preprinted label, complete all sections. REFER TO THE SPECIFIC INSTRUCTIONS CONTAINED IN THIS BOOKLET BEFORE COMPLETING THIS FORM. The information requested in this report is required by law (Section 3002 of the Resource Conservation Recovery Act).

I. GENERATOR'S EPA I.D. NUMBER

T/A C

GAD084362656

II. NAME OF INSTALLATION

VERMONT-AMERICAN-TOCCOA-DIVISION

III. INSTALLATION MAILING ADDRESS

P.O.-BOX-787

Street or P.O. Box

TOCCOA | GA | 30577

City or Town | State | Zip Code

IV. LOCATION OF INSTALLATION (if different than section III above)

MEADOWBROOK-INDUSTRIAL-PARK

Street or Route number

TOCCOA | GA | 30577

City or Town | State | Zip Code

V. INSTALLATION CONTACT

CARLTON-TOMMY

Name (last and first)

404-779-3391

Phone No. (area code & no.)

SIC CODE 34-25

VI. CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Robson R. Sage, III, General Manager *Robson R. Sage, III* *2/9/83*

Print/Type Name | Title | Signature of Authorized Representative | Date Signed

Tear out here

Do not make entries in shaded areas

ENVIRONMENTAL PROTECTION AGENCY

Generator Annual Hazardous Waste Report (cont.)

This report is for the calendar year ending December 31, 1982

Date rec'd: _____ Rec'd by: _____

VII. GENERATOR'S EPA I.D. NO.

T/A C

1	2											13	14	15
N	C	A	D	0	8	4	3	6	2	6	5	6		

VIII. FACILITY NAME (specify facility to which all wastes on this page were shipped)

CALDWELL SYSTEMS

IX. FACILITY'S EPA I.D. NO.

16												28
N	C	D	0	8	6	8	7	1	2	8	2	

X. FACILITY ADDRESS

MT. HERMAN ROAD
LENOIR, N.C. 28645

XI. TRANSPORTATION SERVICES USED (List the name and EPA identification numbers of all transporters whose services were used during 1982. This section to be completed only once. Do not repeat on supplemental sheets.)

OVERNITE TRANSPORTATION I.D. NUMBER VAD 000651778
P.O. BOX 1216
RICHMOND, VA. 23209

XII. WASTE IDENTIFICATION

Sequence #	Line #	A. Description of Waste	B. DOT Hazard code	C. EPA Hazardous Waste No. (see instructions)	D. Amount of Waste	E. Unit of Measure
32	1	LACQUER THINNER CONTAMINATED WITH INK	0 8 (33 34)	D 0 1 (35 38) (39 42) (43 46) (47 50)	3 6 0 0 (59)	P (60)
	2					
	3					
	4					
	5					
	6					
	7					
	8					
	9					
	10					
	11					
	12					

XIII. COMMENTS (enter information by section number—see instructions)

Tear out here

Do not make entries in shaded areas

ENVIRONMENTAL PROTECTION AGENCY

Generator Annual Hazardous Waste Report (cont.)

This report is for the calendar year ending December 31, 1982

Date rec'd: _____ Rec'd by: _____

VII. GENERATOR'S EPA I.D. NO.

T/A C

S C | G | A | D | 0 | 8 | 4 | 3 | 6 | 2 | 6 | 5 | 6 | S C
1 2 13 14 15

VIII. FACILITY NAME (specify facility to which all wastes on this page were shipped)

SCA CHEMICAL SERVICES

IX. FACILITY'S EPA I.D. NO.

S C | D | 0 | 0 | 7 | 0 | 3 | 5 | 9 | 8 | 5
16 28

X. FACILITY ADDRESS

ROUTE 1 BOX 55
PINEWOOD, S.C. 29125

XI. TRANSPORTATION SERVICES USED (List the name and EPA identification numbers of all transporters whose services were used during 1982. This section to be completed only once. Do not repeat on supplemental sheets.)

BRYSON ENVIRONMENTAL I.D. NUMBER -SCD00822313
108 LUADE OAKLAND
LEXINGTON, S.C.

XII. WASTE IDENTIFICATION

Sequence #	Line #	A. Description of Waste	B. DOT Hazard code	C. EPA Hazardous Waste No. (see instructions)		D. Amount of Waste	E. Unit of Measure
32	1	WASTE OIL CONTAMINATED WITH TRICHLORETHYLENE	1 3 (33 34)	F 0 0 1 (35 38)	F 0 0 2 (39 42)	9 6 0 0 (51 59)	P (60)
	2	WASTE WATER TREATMENT SLUDGE FROM ELECTRO-PLATING	1 5	F 0 0 6 (43 46)	(47 50)	5 7 3 5 0	P
	3	SPENT ELECTRO-PLATING SOLUTION	0 2	D 0 0 7 (43 46)	D 0 0 2 (47 50)	1 5 6 0 0	P
	4	SLUDGE FROM BOTTOM OF ELECTRO-PLATING TANK	0 2	D 0 0 7 (43 46)	D 0 0 2 (47 50)	6 0 0 0	P
	5	STEEL VENTILATION SYSTEM FROM CHROME PLATING	0 2	D 0 0 2 (43 46)	(47 50)	5 0 0 0	P
	6						
	7						
	8						
	9						
	10						
	11						
	12						

XIII. COMMENTS (enter information by section number—see instructions)

Tear out here

SIC CODE 2425
BURNS

Georgia Environmental Protection Division
GEORGIA ANNUAL HAZARDOUS WASTE REPORT
Reporting Period January 1 thru December 31, 1983
FORM A
IDENTIFICATION

FEB - 3 1984
ENVIRONMENTAL PROTECTION DIVISION

Please print/type with Elite type (12 characters per inch)

I. EPA I.D. NUMBER GA0843626566

II. NAME OF INSTALLATION
Vermont American Corporation

III. INSTALLATION MAILING ADDRESS

P.O. Box 787
Street or P.O.Box
Toccoa, Georgia 30577
City or Town State Zip Code

IV. LOCATION OF INSTALLATION (if different than Section III. above)

Meadowbrook Industrial Park
Street or Route Number
Toccoa, Georgia 30577
City or Town State Zip Code
Stephens
County

V. INSTALLATION CONTACT

Carlton, Tommy
Name (last and first)
404-779-3391
Phone No. (Area code & number)

VI. PROCESS IN USE (Check as appropriate)

SOG	GEN	TRN	T01	T02	T03	T04	S01	S02	S03	S04	D80	D81	D83
	X												

X PRIVATE (Handle only self generated waste) __ COMMERCIAL (Handle waste generated from other sources)

VII. CERTIFICATION - I certify under penalty of Law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information. I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Robson R. Sage, General Manager — Robson R. Sage — 2/1/84
Print/Type Name & Title — Signature of Authorized Representative — Date Signed

Name of Installation: Vermont American Corporation

EPA I.D. Number: GA0843626560

Form B

SELF-GENERATED HAZARDOUS WASTE AND ITS DISPOSITION

1. EPA HAZARDOUS WASTE NUMBER	F006	D002 D007	F001 F002	D001		TOTAL
2. On Hand, On-site on January 1, 1983	(Est.)3.700	.050	.000	(Est.) .500		4.250
3. Generated during 1983	32.432	4.338	.893	2.150		39.813
4. TOTAL AMOUNT FOR WHICH TO ACCOUNT	36.132	4.388	.893	2.650		44.063
5. Shipped to State of South Carolina	30.027	4.388	.893			35.308
6. Shipped to State of North Carolina				2.650		2.650
7. Shipped to State of						
8. Shipped to State of						
9. Shipped to Georgia Facility for Use, Reuse, Recycle or Reclaim						
10. Shipped to Georgia Facility for Treatment, Storage, or Disposal						
11. Treated On-site						
12. Treatment Code						
13. Disposed of On-site						
14. Disposal Code						
15. On Hand, On-site on December 31, 1983	(Est.)6.105	.000	.000	.000		6.105
16. Storage Code						
17. Other (Explain)						
18. TOTAL AMOUNT OF DISPOSITION	30.027 36.132	4.388	.893	2.650		37.958 44.063

Department of Natural Resources
ENVIRONMENTAL PROTECTION DIVISION
270 WASHINGTON STREET S W
ATLANTA, GEORGIA 30334

JOE D. TANNER
Commissioner

J. LEONARD LEDBETTER
Division Director

FILE COPY

July 26, 1983

Rhona,
Please file:
Vermont American
Toccoa Division (Red)

M E M O R A N D U M

TO: Betty Burns

THRU: Howard Barefoot
Joe Surowiec

FROM: Shirley Maxwell

SUBJECT: Vermont American Corporation, Toccoa
Delisting for F006 Waste, 3rd Response

COMMENTS:

The deficiencies delineated in my December 17, 1982, memo have not been addressed. The company has never submitted a complete delisting package, but has sent in pieces of information over a 2 year period.

Certain objections remain:

1. The samples were collected from June 11 to July 22, 1981, and then shipped to Aqualabs in Illinois on August 3, 1981, where they were tested until August 24, 1981.

   We have no data concerning the qualifications of the person taking the samples, or how the samples were preserved during June 11 to August 3rd. Any Chromium +6 testing would be invalid.

2. Assuming that no metals reactions took place inside the sample containers for 2 months on the shelf, we can still not accept the EP data submitted because the Method of Standard Additions was not used, and also because the samples themselves were not spiked. The laboratory submitted general quality control data on their lab work which is good but does not verify these particular results.

3. They should submit 4 representative sample tests for total cyanide and Cyanide Amenable to Chlorination - on the waste itself - the samples to be collected, preserved, and tested within 24 hours.

4. This office is unfamiliar with any EPA certifying of individuals for Drinking Water Act analysis. The qualifications stated for the analyst need clarification. Most labs employ degreed chemists. In any event cyanide is not one of the Drinking Water Act chemicals.

CONCLUSION:

We now have on file one analysis for total constituents in the sludge. The leaching data submitted appear to indicate that the waste could ultimately be delisted. The company should be informed that the delisting procedure is precise and detailed, and a recommendation should be made that they start over with a local lab familiar with EPA and EPD requirements such as Law Engineering or Dunn Labs. They should get these people to assist at the sample collection and preservation, and have the lab write a complete report on what they did and how they verified their results. They should be informed that if the total leachable Chromium is less than 1.5 ppm there will be no need to do a Chromium +6 test on the EP extract.

If the company does not have it, they should be supplied with the 1983 Delisting Procedure.

Note that if we finally delist, it will be based on an effective electrochemical process for reducing Chromium +6. We may wish to have them do an EP for Total Chromium periodically to verify that it is still efficient. We also, at one time, recommended segregated burial with lime (before RCRA). We may wish to include this in any approval.

SFM:mg:2450B
cc: John Taylor
Shirley Maxwell
File: Vermont American (R)

DEPARTMENT OF NATURAL RESOURCES

ENVIRONMENTAL PROTECTION DIVISION

WASTE MANAGEMENT DATA SHEET

NAME AND LOCATION OF FACILITY
Vermont American Corporation
Toccoa Division
P.O. Box 787, Meadowbrook Industrial Park
Toccoa, Georgia 30577

PERSON TO CONTACT
(ENTER THE NAME, ADDRESS, TITLE AND BUSINESS TELEPHONE NUMBER OF THE PERSON TO CONTACT REGARDING INFORMATION SUBMITTED ON THIS FORM).
Tommy Carlton, Project Engineer
P.O. Box 787, Meadowbrook Industrial Park
Toccoa, Georgia 30577
Phone# (404) 779-3391

DATES OF WASTE HANDLING
(ENTER THE YEARS THAT YOU ESTIMATE WASTE TREATMENT, STORAGE OR DISPOSAL BEGAN AND ENDED AT THE SITE. IF YOU SELECTED A FACILITY OFF-SITE PLEASE NOTE AND EXPLAIN IN "COMMENTS" SECTION.
1978-Began pretreatment and temporary storage awaiting shipment to secured landfill or incineration

GENERAL TYPE OF WASTE

1- ( ) ORGANICS
2- ( ) INORGANICS
3- (X) SOLVENTS
4- ( ) PESTICIDES
5- (X) HEAVY METALS
6- ( ) ACIDS
7- ( ) BASES
8- ( ) PCB's
9- ( ) MIXED MUNICIPAL WASTE
10- ( ) UNKNOWN
11- ( ) OTHER (SPECIFY)

WASTE QUANTITY (ESTIMATED)
120 tons (Est) - 1978 through 1983

HAS THERE EVER BEEN A SPILL OR DISCHARGE OF A HAZARDOUS SUBSTANCE FROM YOUR FACILITY? (BRIEFLY EXPLAIN THE NATURE OF THE RELEASE).
None

COMMENTS

(IF THERE IS ANY COMMENTS THAT YOU BELIEVE WOULD CLARIFY THE PAST WASTE HANDLING PRACTICES OF YOUR FACILITY OR OF FACILITIES YOU SELECTED TO HANDLE YOUR WASTE, PLEASE ELABORATE IN THE SPACE PROVIDED).

Pretreat plating waste waters, precipitate heavy metals, dehydrate, and collect for disposal at secured landfill (S.C.A. Chemical Services, Pinewood, South Carolina, EPA SCD070375985. Solvent waste shipped to and incinerated by Caldwell Systems, Lenoir, North Carolina, EPA NCD086871282

WASTE TRANSPORTORS USED: Bryson Environmental, Lexington, S.C., SCD00822312
Overnite Transporting, Richmond, VA, VAD000651778

SIGNATURE AND TITLE Robson R. Sage, General Manager (404)779-33

NAME TELEPHONE

P.O. Box 787, Meadowbrook Ind. Park
STREET

Toccoa, GA 30577
CITY STATE ZIP CODE

Robson R. Sage 2/2/87
SIGNATURE DATE

JOE D. TANNER
Commissioner

J. LEONARD LEDBETTER
Division Director

Department of Natural Resources

ENVIRONMENTAL PROTECTION DIVISION
270 WASHINGTON STREET S.W.
ATLANTA, GEORGIA 30334

August 7, 1984

Mr. Tom Eubank
Vermont American Corporation
715 E. Grey Street
Louisville, KY 40202

RE: Delisting Petition For Waste #F006

Dear Mr. Eubank:

I received a request from Law Engineering Co. for a written response to their letter of May 11, 1984.

This will serve to confirm that this office will accept the sampling and testing plan as described in the letter from Mr. Neal. Please be advised that if the level of total chromium in the Extraction Procedure extract is less than 1.5 milligrams per liter it will not be necessary to perform the hexavalent chromium test. However, if it is greater, then only an alkaline digestion on the waste itself, not the extract, will be acceptable. This is Method 8.548 in the EPA Manual SW846. I have discussed this with Mr. Gustin of Law Engineering.

If Law Engineering is to supervise the sampling then a description and/or diagram should be submitted by them in the petition.

I am enclosing a copy of our current Delisting Procedure which reflects new requirements being employed by US EPA. We are expecting a directive shortly and will implement such requirements as "percent oil and grease" at that time. You may wish to have this work done now so as to avoid a later review if your waste should be delisted.

If you will respond to each of the items in the Delisting Procedure with a statement or paragraph it will be possible to evaluate your petition in the shortest possible time. As you are aware, the Delisting Document is a justification for deviation from the regulations. It is available to the public, and must be complete and self-contained.

If I can be of further help please call at 656-2833.

Sincerely,

Shirley F. Maxwell

Shirley F. Maxwell
Environmental Specialist
Industrial & Hazardous Waste
Management Program

SFM:jrh:1177M

Enclosure

cc: John Taylor
Mr. Jim Gustin
Law Engineering Testing Co.

File: Vermont American (R)

GEORGIA DEPARTMENT OF NATURAL RESOURCES
Environmental Protection Division
270 Washington Street, S.W.
Atlanta, Georgia 30334

LAND PROTECTION BRANCH
Industrial & Hazardous Waste
Management Program
(404) 656-7802

GENERATOR STANDARDS INSPECTION CHECKLIST

SECTION I. FACILITY INFORMATION

SIC 3425 TSDF? Yes ___ No X Transporter? Yes ___ No X INSPECTION DATE: August 9, 1984

Vermont American Corp., Toccoa Division | GAD084362656 | Stephens
Facility Name | I.D. No. | County

Post Office Box 787 | Toccoa | 30577 | 404/779-3391
Mailing Address | City | Zip | Telephone Number

Vermont American Corporation | Betty Burns
Name of Owner/Operator | Inspector's Signature

SECTION II. INSPECTION SUMMARY & REVIEW

Reason for Inspection: X Routine ___ Other ___

Discussed with:

Name: Tommy Carlton Title: Project Engineer

Address: Same as above Telephone: Same as above

Name: ___ Title: ___

Address: ___ Telephone: ___

Copy of this report submitted to:

Name: Tommy Carlton Title: Project Engineer

Address: Same as above Telephone: Same as above

Name: ___ Title: ___

Address: ___ Telephone: ___

Photographs: ___ yes X no: No. ___

Samples collected: ___ yes X no: No. ___ Split ___ yes ___ no

Summary of Findings:

See Notice of Violation

Reviewed by: [signature] Review date: [illegible]

Attachments:

Form: HW 0038F/1983

	Yes	No	N/A
5. Wastes are manifested properly? (262.20)	X		
6. Each container/tank is marked "Hazardous Waste" during accumulation. (262.34)	X		
7. Wastes are labelled, marked "Hazardous Waste" (49 CFR 172.304) and placards offered to transporter prior to transport? (262.30)	X		
8. Facility is operated and maintained to minimize possibility of fire, explosion, or release of hazardous waste to the environment. (262.31)	X		
9. Facility has the following equipment to deal with hazards posed by waste handled: (265.32)	X		
(a) alarm system	X		
(b) telephone or 2-way radio	X		
(c) fire extinguishers	X		
(d) water	X		
10. Facility tests and maintains above equipment as necessary. (265.33)	X		
11. Personnel have immediate access to communications or alarm systems (265.34)	X		
12. Adequate aisle space maintained. (265.35)	X		
13. Arrangements with local authorities have been made to familiarize them with facility, designated response authority, etc. (265.37)	X		
14. Contingency plan written (265.51). If yes: contingency plan includes (265.51)	X		
(a) facility personnel action responses	X		
(b) describes local authorities agreements	X		
(c) lists names, addresses, phone #'s of emergency coordinators, designates primary emergency coordinator, and lists others in order of assumption of responsibility	X		
(d) lists all emergency equipment at the facility, location, physical description and capabilities	X		
(e) includes an evacuation plan for facility personnel	X		
(f) copies of contingency plan submitted to police, fire department, hospital, local emergency response teams	X		
(g) contingency plan amended when necessary		X	
(h) at least one emergency coordinator is on facility premises or on call	X		
(i) Emergency coordinator responds immediately to emergencies. (265.56)	X		

JOE D. TANNER
Commissioner

J. LEONARD LEDBETTER
Division Director

Department of Natural Resources

ENVIRONMENTAL PROTECTION DIVISION
270 WASHINGTON STREET S W
ATLANTA, GEORGIA 30334

September 7, 1984

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Mr. Tommy Carlton
Project Engineer
Vermont American
Post Office Box 787
Toccoa, Georgia 30577

RE: Notice of Violation
Generator Requirements
Vermont American Corporation
Toccoa Division
Toccoa, Georgia
GAD084362656

Dear Mr. Carlton:

Reference the inspection of Vermont American Corporation, Toccoa Division, by Ms. Betty Burns of the Industrial and Hazardous Waste Management Program to determine your company's compliance status with Georgia's Rules for Hazardous Waste Management, Chapter 391-3-11-.08, Standards Applicable to Generators of Hazardous Waste. As Georgia's Rules adopt and incorporate by reference the Federal Regulations found in Section 40 CFR, Part 262, the following violations are called to your attention for appropriate action:

391-3-11-.08/40 CFR §262.34(a)(1) "Accumulation Time", because your facility did not have available for review a weekly inspection log and schedule as required by 40 CFR §265.174.

391-3-11-.08/40 CFR §262.34(a)(4) "Accumulation Time", because your facility indicated at the subject inspection that you no longer generate degreaser solvents, your Contingency Plan should be amended to delete degreaser solvents as required by 40 CFR §265.54.

Please submit to this office no later than October 31, 1984 documentation which demonstrates that these deficiencies have been corrected. If the deficiencies included lack of required reports, records, plans, etc., submit such documents for our review.

Please find enclosed a copy of the referenced Georgia Rules for Hazardous Waste Management, and a compliance checklist. Should you have any questions, please feel free to call Ms. Betty Burns at (404) 656-7802.

Sincerely,

Howard L. Barefoot
Unit Coordinator
Industrial & Hazardous Waste
Management Program

HLB:bbw:060
Enclosures
cc: James Scarbrough
Betty Burns
File - Vermont American Corporation - Toccoa - (R)

FILE: VERMONT AMERICAN (RED)

VERMONT AMERICAN CORPORATION

TOCCOA DIVISION

POST OFFICE BOX 787
TOCCOA, GEORGIA 30577
404/779-3391

October 29, 1984

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

RECEIVED

NOV 2 1984

ENVIRONMENTAL PROTECTION DIVISION
LAND PROTECTION BRANCH

Mr. Howard L. Barefoot
Unit Coordinator
Industrial & Hazardous Waste Management Program
Department of Natural Resources
Environmental Protection Division
270 Washington Street, S. W.
Atlanta, Georgia 30334

RE: Response to:
Notice of Violation
Generator Requirements
Vermont American Corporation
Toccoa Division
Toccoa, Georgia
GAD084362656

Dear Mr. Barefoot:

Reference the inspection of Vermont American Corporation, Toccoa Division, by Ms. Betty Burns of the Industrial and Hazardous Waste Management Program, the following actions to comply with:

391-3-11-.08/40 CFR 262.34(a)(1) "Accumulation Time" and 40 CFR 265.174 a weekly inspection log.

A copy of inspection log with three weeks of documentation is enclosed.

391-3-11-.08/40 CFR 262.34(a)(4) "Accumulation Time" and 40 CFR 265.54, amend to delete degreaser solvents from Contingency Plan.

Contingency Plan was amended to delete degreaser solvents we no longer employ. An amended plan supplied to all persons and departments presently holding a copy of the Vermont American Hazardous Waste Contingency Plan.

Tommy Carlton
Project Engineer
Vermont American Corporation, Toccoa Division

TC/mlf

cc: Rob Sage
Tom Eubank
V.M.C. Toccoa File

Hazardous Waste Contingency Plan

I. General Information:

Vermont American Corporation
Meadowbrook Drive
Meadowbrook Industrial Park
Toccoa, Georgia 30577

Operated by:
Robson R. Sage III, Route 5, P.O. Box 173K, Toccoa, Georgia 30577
Tel. 404-886-7365 (home), 404-779-3391 (office)

Emergency Coordinators:
Tommy Carlton, Route 2, Martin, Georgia 30557
Tel. 404-356-4255 (home), 404-779-3391 (office)

Rance Smith, Route 4, Box 565, Cawthon Road, Toccoa, Georgia 30577
Tel. 404-886-1355 (home), 404-779-3391 (office)

This facility is engaged in the manufacture of steel circular saw blades where heat treatment, electro-chrome plating, and silk screening operations are performed. The facility collects and treats wastes from these operations. The sludges are offered for disposal in an approved EPA landfill.

The activities to generate waste are listed below:

(A) Collection of rinse water from electro-chrome plating into an 8,000 gallon holding pit. Adjust ph automatically by adding either acid or caustic solutions. Continuous pumping of water through an electro-chemical cell for converting CR6 to CR3. Heavy metals are percipitated for collection in a clarifier. This sludge is dehydrated and stored in drums and offered for disposal. Water is disposed of in a publicly owned sewer.

(B) Spent chrome plating bath solutions that are contaminated and unfit for production plating are collected in lined steel drums and offered for disposal.

(C) Plating bath sludge from tank bottoms of electro-chrome baths are scooped up and collected in lined steel drums and offered for disposal.

(D) Solvents for silk screening wash-up are stored in steel drums.

II. Emergency Coordinators

Principal: Tommy Carlton, Route 2, Martin, Georgia 30557
Tel. 404-356-4255 (home), 404-779-3391 (office)

Alternate: Rance Smith, Route 4, Box 565, Cawthon Road, Toccoa, Gerogia 30577
Tel. 404-886-1355 (home), 404-779-3391 (office)

Either coordinator can deputize other employees to assist them in case of an emergency. The coordinator is chief of the emergency crew and has trained the personnel on each shift. The coordinators are "on call" and can be contacted by phone.

III. The plan will be implemented in case of an accident that might threaten human health or the environment. The coordinator has full authority to implement the plan, depending upon the degree of seriousness. Some examples of cases where the coordinator might implement the plan are:

(A) Overflow of waste water in holding pit.

(B) Rupture or fire near sludge storage area (see diagram of site).

(C) Fire in electro-plating room or shipping department.

(D) Uncontrollable spillage of chrome plating solution.

(E) Fire near ink and solvent storage.

IV. Emergency Response Procedures
Notification:

(A) Any employee discovering a fire or hazardous waste spill would sound the emergency alarm and contact the emergency coordinator and Toccoa Fire Department (911).

(B) All employees would evacuate the building according to fire exit plan enclosed.

(C) The coordinator, according to the situation, would notify the proper outside emergency parties.

(D) The coordinator would call the National Response Center (800-424-8802) to report the incident, giving name, phone number, name and address of facility, time and type of accident. He should identify and state quantity of material involved and list any injuries and possible hazards to human life or environment outside company property.

(E) The coordinator or an assistant would call the roll of all employees on that shift to make sure everyone is clear of the building.

Contingency Plan

(A) The emergency team coordinator would go to contain and bring under control the accident. The cleanup would follow by removing all contaminates.

(B) If the accident could be harmful to near-by residents, the coordinator would advise the sheriff to evacuate the area.

Follow up Action

(A) All contaminants would be packaged in proper shipping containers with correct labeling and markings.

(B) All emergency equipment would be restored to full operation condition.

(C) The coordinator would investigate the cause of the accident and take steps to prevent a reaccurance of the accident.

(D) The coordinator will notify EPA, state and local authorities of progress and restoration of accident area before resuming operation in accident area.

V. Emergency Equipment

(A) All working areas have chemical fire extinguishers.

(B) Showers and eye fountain for personnel wash-off.

(C) Two fire hydrants with hoses, nozzles, axes, etc.

(D) Supply room has first-aid supplies.

(E) Coveralls, rubber boots, rubber gloves, face masks, etc.

(F) Alarm system that can be activated from inside facility and office.

(F) Central emergency number (911) for sheriff, fire, and hospital.

VI. Coordination Agreements

(A) Toccoa Fire Department (Tel. 911) has received a copy of the contingency plan. The Fire Department has visited the facility and given us a demonstration of how to handle our equipment.

(B) Stephens County Sheriff's Department has received a copy of the contingency plan.

(C) Stephens County Hospital has received a copy of the contingency plan and are aware of health hazards regarding our facility.

VII. Evacuation Plan

(A) All personnel will be evacuated from building by enclosed fire exit plan on the sound of the emergency alarm.

(B) All persons will assemble at rear parking lot to answer "roll call."

(C) If necessary, evacuation will continue through west exit into Meadowbrook Drive.

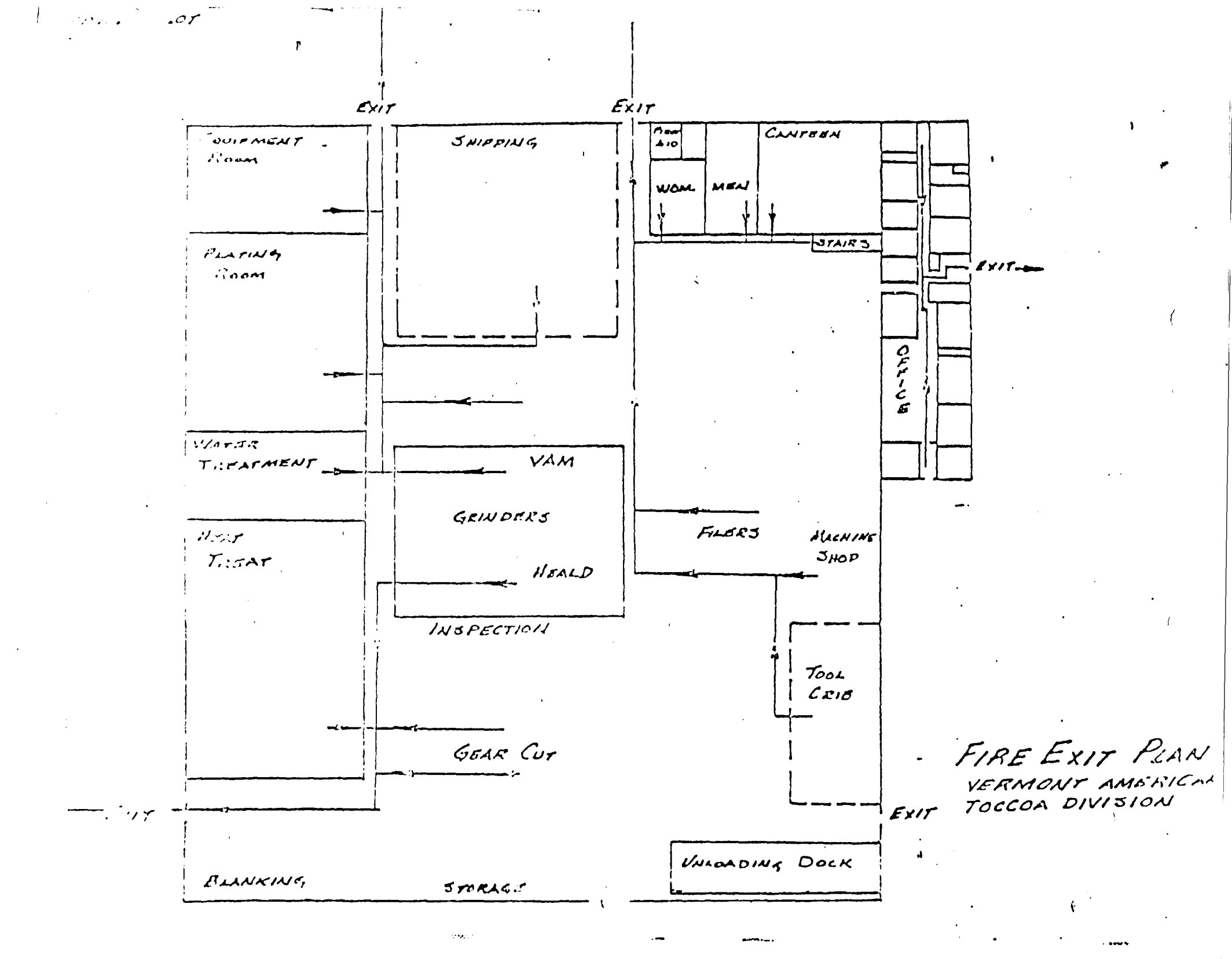
VIII. Required Reports

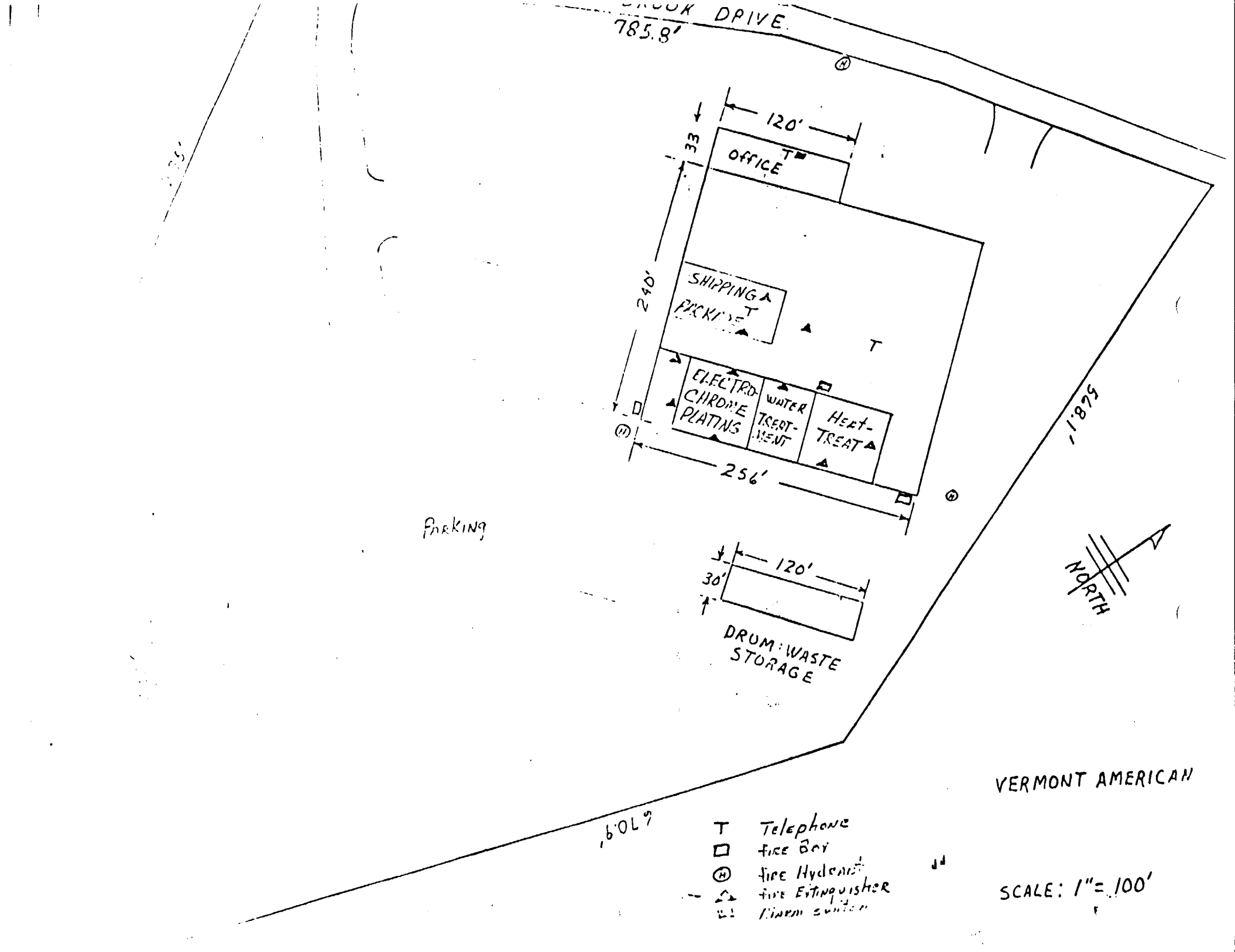
(A) The operator will notify the EPA Regional IV Administrator and appropriate state and local authorities that follow up actions have been implimented.

(B) The operator will note in the operation records the time, date, and details of any incident that requires implementation of the contingency plan and submit a written report on the incident to the EPA Regional Administrator in accordance with CFR 40-265.56.

(C) The emergency coordinator will revise the contingency plan in accordance with the experience acquired during each emergency situation and will forward copies of the revisions to each holder of the original plan.

The facility site plan is attached.


EXIT
EXIT
EQUIPMENT Room
SHIPPING
Room 110
WOM.
MEN
CANTEEN
STAIRS
EXIT
PLATING Room
OFFICE
WATER TREATMENT
VAM
GRINDERS
HEALD
INSPECTION
FILERS
MACHINE SHOP
HEAT TREAT
TOOL CRIB
GEAR CUT
EXIT
EXIT
BLANKING
STORAGE
UNLOADING DOCK
FIRE EXIT PLAN
VERMONT AMERICAN
TOCCOA DIVISION


DRIVE
785.8'
120'
33
OFFICE
240'
SHIPPING & PACKING
ELECTRO-CHROME PLATING
WATER TREAT-MENT
HEAT-TREAT
256'
1875
Parking
120'
30'
DRUM: WASTE STORAGE
NORTH
VERMONT AMERICAN
T Telephone
Fire Box
Fire Hydrant
Fire Extinguisher
SCALE: 1" = 100'

Toccoa Division

Weekly Hazardous Waste Inspection Log

Month/ Day Year	Inspectors Initial	Waste Code Number	Leakers	Drum Conditions	Total Number Drums	Other Comments
10-16-84	TC	F-006	None	OK	23	
		D-001	None	OK	2	
10-23-84	TC	F-006	None	OK	28	
		D-001	None	OK	2	
10-29-84	TC	F-006	None	OK	31	
		D-001	None	OK	2	

Department of Natural Resources
ENVIRONMENTAL PROTECTION DIVISION
270 WASHINGTON STREET, S.W.
ATLANTA, GEORGIA 30334

~~J. LEONARD LEDBETTER~~
Commissioner

J. LEONARD LEDBETTER
Division Director

November 19, 1984

FILE COPY

Mr. Tommy Carlton
Project Engineer
Vermont American Corporation, Toccoa Div.
Post Office Box 787
Toccoa, Georgia 30577

RE: Compliance Status
Generator Requirements
Vermont American Corporation, Toccoa Div.
Toccoa, GA
GAD084362656

Dear Mr. Carlton:

Reference your letter and data submission of October 29, 1984 wherein you address the violations outlined in our September 7, 1984 Notice of Violation to you.

Based on the letter and supporting data reviewed by this office, we have concluded that the previous violations of Georgia's Rules for Hazardous Waste Management, 391-3-11-.08, Standards Applicable to Generator of Hazardous Waste noted in our September 7, 1984 letter have been corrected and the referenced facility is now in compliance with the aforementioned rules.

The facility will be periodically reinspected to insure continued compliance, and should you have any questions in the interim, please call Betty Burns at (404) 656-7802.

Sincerely,

Howard L. Barefoot
Unit Coordinator
Industrial and Hazardous Waste
Management Program

BB/mcw
cc: John Taylor
Betty Burns
File: Vermont American Corp., Toccoa Div. (R)

PRELIMINARY ASSESSMENT
TELEPHONE CONVERSATION RECORD

Site Name: Vermont American Corp-Toccoa-Div I.D.# GAD082436265o

Location Address: P.O. Box 787; Meadowbrook Industrial Pk ; Toccoa, Ga 30577

Phone: (404)779 - 3391.

Contact: Mr. Tommy Carlton Title: Project Engineer

Address: P.O. Box 787 Toccoa, Ga. 30577

Phone: (404)779 - 3391.

Authority: Section 3012 of CERCLA, Comprehensive Environmental Response, Compensation and Liability Act.

Facility has notified EPA via - RCRA 3001 site is in HWDMS
CERCLA 103c site is in NOTIS

Need Information concerning waste generation and disposal prior to Nov. 19, 1980.

How long has facility been in operation? 1977 (October)

What kind of wastes were generated and how much?

Chrome Hydroxide. (small amounts) [from state records inspection 3-1-78 - Waste accumulation was 2000 lbs/month

Was it disposed on site and where?

No, wastes were never disposed of on site.

Was it transported offsite and where? SCA Chemical Services

Pine wood South Carolina. GSX Incorp (currently)

Was it treated and how?

Pretreated wastes, prior to disposal off-site.

Have there been any past spills? Describe.

No, spills have ever occurred on site.

Date of call: December 12, 1985 Time: 10:45 AM Spoke to Mr. Carlton

Hilda A. Knowles

Reviewed by Mike Allred